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Edited by

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EDITORIALS

FALSE ACCUSATIONS OF RAPE.

In former issues of THE JOURNAL OF UROLOGY AND SEXOLOGY, I published a great number of cases of false accusations of rape. But the subject is one which needs to be continually referred to, because such accusations are very frequent, and the Lord only knows how many innocent people are languishing in jails on account of false accusations by either hysterical or vicious and pervert girls and women.

Only the other day, right here in New York City, a dentist was arrested on a patient's charge that he attempted to commit rape on her. The charge proved false and the dentist was freed. But what anxiety, what suffering, what expense he had to go thru on account of the malicious charge of an unprincipled female!

I have always claimed that in accusations of rape, the accused should *invariably* be given the benefit of the doubt; unless the circumstances are such that there is not the slightest doubt in anybody's mind as to the truth of the accusation, the charges should be dismissed. The cunning and the malice of some females is beyond belief. I know of a case where the situation was so cunningly contrived that the accused had absolutely no way of proving his innocence. And but for the fact that a physician who learned of the case offered to go and testify that he knew the girl to be of disreputable character, that he knew that she had lived with several men before, and that he had treated her for gonorrheal infection, the poor man might still be languishing in prison serving a twenty years' sentence.

And it is really remarkable how young in age girls may be who bring such accusations against men. Girls of 14, 12 and even 10 have been known to invent stories which had every

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appearance of truth and which left no doubt in the minds of prosecutor, judge and jury, of the guilt of the accused. But eventually they proved nothing but vicious inventions.

An esteemed reader of the Journal sent me in a clipping from "*The Cincinnati Commercial Tribune*" of October 5th. The clipping is worth while reprinting in its entirety, which I am doing herewith.

TWO MEN HELD IN JAIL FIVE WEEKS ON FALSE CHARGE OF TWO YOUNG GIRLS; FREED WHEN CHILDREN ADMIT LYING.

Torn with anxiety and wan with the rigor of five weeks in cells, two young men late yesterday were freed from the Newport jail when two fourteen-year-old girls confessed that the charges they had placed against the young men, which might have sent the latter to the gallows, were utterly untrue.

"It is one of the most remarkable cases I have ever seen during my twenty years' experience as a Prosecutor and a lawyer," Lawrence J. Diskin, Commonwealth Attorney, said.

Resentment, which Josephine Tucker and Lusetta Hall, living with their parents near Ft. Thomas, held for William Harris, 25 years old, and Charles Knause, 20 years old, both living in the Baby Farm Sub-division of Ft. Thomas, is said to have actuated the girls to make the charges. The young men, it is said, told the girls' parents that the girls loitered about the military reservation in Ft. Thomas, talking to soldiers.

On August 30th the Cincinnati police found the girls in the Dixie Terminal, and believing they were runaways, held them for investigation. The girls told policemen they had been attacked by two men.

When Edward Hamilton, county detective of Newport, with attachés of the Campbell County Juvenile Court, returned the girls to Newport, the girls named Harris and Knause as their assailants.

They said that during the absence of relatives the men came to their home and attacked them.

The girls were sent to the Juvenile Home in Greendale, Ky., to be held by the Juvenile Court authorities. Harris and Knause were arrested at once and placed in jail without bond. Warrants were filed against them, charging them with an offense punishable in Kentucky with death.

Five weeks passed and the grand jury investigation began. The girls were taken to Newport.

"I'm through with lying. I'm going to tell the truth," the Tucker girl told those who questioned her.

Close cross-questioning began, and the girl confessed that the charges were without foundation.

Then the Hall girl broke down.

"We agreed to accuse them," she confessed.

"Don't you girls know that you might have been responsible for two innocent men going to the gallows?" said Prosecutor Diskin.

"Yes....." the Hall girl reluctantly agreed. "But if Josephine had stuck to her story, I'd have stuck to mine."

"Why in the world did you do it? Prosecutor Diskin asked.

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"Oh, we didn't like the men," they said.

The girls were sent to jail and last night they were taken to the Greendale Place of Detention, where they will remain until they have attained their majority.

Harris and Knause were notified and brought before Circuit Judge Caldwell. Prosecutor Diskin asked that the charges be dismissed, and they were instantly released.

In the midst of her husband's misfortune, when the finger of everyone pointed against him, Mrs. Harris, mother of two children, steadfastly maintained her faith in him, and told Newport authorities over and over, "He is not guilty. Bill would not do it." She said her husband was at home at the time the girls charged him with attacking them.

Now it is quite possible that it is the fact that rape is punishable *with death* in Kentucky that saved the lives of the two young men. It is quite likely that it was the knowledge that the two young men might be hanged that stirred the distorted consciences of these two young female degenerates. It is quite likely that if they had known that the punishment might only be a year or two in prison, that they would have remained silent. As it is, one of the girls said that if the other one had stuck to her story she too would have stuck. Two innocent young men, one 25 years old, the other one 20, might have lost their lives on account of two little perverted liars.

But the fault is not only the girls'—society also shares the guilt. For such girls usually know that it is very easy to accuse a man of this crime, that no corroboration is necessary, that the popular passion is at once aroused, and that all that is necessary is to bring a charge against a man and he is at once clapped into prison. If such girls knew that they would have to stand a severe cross-examination, that they would be grilled by sane and cool-headed men and women, that they would have to give proofs of their accusations, they would hesitate before charging innocent men with the commission of such a crime.

Another point that is well to bear in mind is this: that it is very often girls and women who are infatuated with a man who has repulsed their advances who bring such charges. They are actuated by an irresistible feeling of revenge. But now and then when the innocent man is about to suffer the penalty they weaken, and confess that their charge was false.

Again and again I must repeat: We should be very careful before giving credence to accusations of rape. Ninety, if not ninety-nine of every one hundred such accusations, are false.

—W. J. R.

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OBSCENE PICTURES AND SEXOLOGY.

A gentleman came to see me this afternoon. He had no appointment and I was very busy, and my first impulse was to send down word that I could not see him, he should come some other time. But his engraved card bore so many initials after his distinguished name, and he had come from such a distance, from out of town, that I agreed to see him.

After the preliminary greetings he opened a portfolio, removed therefrom and quickly arranged a large number of photographs of dazzlingly beautiful women. Yes, they were beautiful, but they were absolutely nude and in the most obscene imaginable positions; they were lewd and lascivious. But they were not the worst; on a number of them there were men and women in the most "remarkable"—some would call them horrible—positions of normal and abnormal coitus; and many represented the most grotesque perversities as well as the vilest perversions. The owner of these pictures—they numbered about three hundred—was very proud of his collection. These pictures, he said, "are the *crème de la crème* of obscenity. There is nothing like them anywhere. I spent years in collecting them, some are photographs that I took myself. You will not find anything like it in Paris, Barcelona or Havana." And he was willing to part with his collection at ten dollars per photograph. He would let the whole collection go for two thousand dollars.

I told him that I was sorry, but that I would not pay ten cents apiece. He became ruffled. Did I think they were not good enough? "Too good, but I am not interested in such things." "Are you not an Editor of the JOURNAL OF SEXOLOGY?" "Yes, I am." "Well?" "Well what?" "Are you not interested in all sex questions and sex subjects?"

I had to explain to him that I no more considered vulgar obscenity or common pornography a legitimate part of sexology than I considered a wart on a man's face a legitimate part of his face. I was interested in sexology because I was interested in solving the complex sex problems which confront men and women in civilized society and which cause such an enormous amount of anguish and suffering, suffering physical and mental. Obscene pictures photographs representing normal and abnormal coitus and sexual perversions will *not* help to solve *any* sexual problems. On the contrary, they may aggravate them by leading to sexual perversions, and by acting as sexual excitants. And as I said many years ago, in *Altruria*, the sexual instinct is strong enough suffering, suffering physical and mental. Obscene pictures, excitation can only act ruinously.

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"But some people, quite a few in fact, derive great pleasure and satisfaction from a contemplation of such pictures."

"If they do they are welcome to them. I do not advocate the establishment of any censorship—except in the case of the young—I would not arrest or send to prison people who handle those things, but I am not interested in them. Good day."

I fear that my visitor went away with the impression that I was a prude—the worst thing that one can be guilty of in the eyes of some people.

It can't be helped, but I must re-emphasize that I am not interested in obscene pictures and erotic books, and I pity the people who pay fancy prices for the former or the latter. Some of them are truly obsessed.

And I will take this opportunity to repeat that sexology is a serious study of the sex instinct and its variegated manifestations, normal, and abnormal, and its purpose to solve problems and to prevent and cure misery. It has nothing in common with pornographic pictures, erotic books, barroom jokes or smoking-room smutty stories.—W. J. R.

ARE ALL MEN AND WOMEN BISEXUAL?

The semi-educated and half-baked who have their thinking done for them, generally take everything they read for pure coin, for unalloyed, undisputable one hundred per cent. truth. This explains why those who can cleverly handle scientific jargon find it so easy to have zealous followers and devoted adherents. And when a writer nonchalantly refers to a theory as "well-established," "universally accepted," and treats it as so well-known and definitely proved that a discussion of it would be a waste of time and an insult to the reader's intelligence, the mushy-minded reader is readily bamboozled or hypnotized, and does accept the writer's statements without criticism or analysis.

More and more frequently do we come across statements that there is no such a thing as a man who is all-man or a woman who is all-woman. "We are all bisexual, hermaphroditic. It is only a matter of proportion. Some men are seventy-five per cent man and twenty-five per cent. woman, some sixty per cent man and forty per cent. woman, some are fifty-fifty, etc. The same thing with women."

This is piffle, humbug and tommyrot. The vast majority of mankind—say ninety per cent.—are sexually normal; that is, the men are all-man, and the women are all-woman. Of course there are bisexual men and women; the same as there are completely homosexual men and women. But to speak of all man-

kind as bisexual is absurd; the responsibility for this absurdity must rest on the shoulders of our irresponsible friends, the psychoanalysts, such as Stekel, Sadger, Ferenczi, etc., particularly the first.

The writer knows men and women who are so thoroly heterosexual that the touch of the naked body of a member of the same sex is unpleasant to them, and to sleep in the same bed with one of the same sex is a torture to them.

I do not intend to go deeply into the subject in this place. This brief editorial note is really written as an answer to a query. I may deal with the subject in detail at some future time. Here I wish only to emphasize: if somebody asks you if it is true that all men and women are bisexual, tell him that it is not; that such an assertion is piffle and tommyrot. Which latter is not quite a parliamentary expression, but is the only kind I can use in dealing with some of the assertions of our so-called scientists.—W. J. R.

THE ELEMENT OF FEAR IN LOVE AND JEALOUSY.

A patient whom we will call Mr. A., whom I had treated a number of years ago, when he was yet unmarried, came to me in a state of most pitiful dejection and terror. I had known him as a healthy, cheerful, optimistic young man; he was quite unrecognizable. I had not seen him for several years, but knew that he lived happily with his wife.

Briefly, the story was this: his wife left him for another man. He loved his wife quite well, tho not any too passionately, and while he had her he could get along quite well without her. If she had just left him, if she had not gone to live with another man, he would not have minded it much. At least he thinks he wouldn't. But the knowledge of her living with some other man is causing him indescribable tortures. Appetite completely gone, has lost thirty-five pounds in weight, but worst of all, as is usually the case in such calamities, sleep left him entirely; strong hypnotics and excessive doses of whiskey induce only a disturbed sleep of two or three hours' duration. All that was all right. I could understand his depression, his loss of appetite, his sleeplessness, his agony and his anguish. But what I could not understand was the abject terror in which the man seemed to be engulfed. He was afraid of the future, he was afraid of life.

Analyzing his case, taking it apart, discussing it with him sympathetically, I made the following discovery: his terror was due to the fear that his agonies would never go away, that he would never forget, that he would suffer the same tortures as

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long as he lived. He finally himself volunteered the statement that he would not suffer so atrociously if he were sure or at least could hope that his agonies would not be permanent; if he knew that they would not last more than three or six months or a year, he would try to become reconciled to his fate, to calm himself. A person can suffer, he said, for a certain length of time, if he knows that his sufferings are going to have an end; but to suffer indefinitely—that is, *to fear* that the suffering was perhaps going to be indefinite, eternal, nobody could stand that.

I was able to assure him positively that his suffering *would* have an end; that many people in a position similar to his had the same sort of fear; that it was a physiological and psychological impossibility to experience the same suffering, the same agonies, undiminished, unabated, unmodified. I demonstrated that without exception all the cases I had in my personal practice recovered very nicely; the one exception committed suicide. If he wished to commit suicide nobody could prevent him from doing so; but if he wanted to live, I would do everything in my power to help him to come to terms with life, to forget the past, and to start anew.

Those who know the enormous power of suggestion, the relief obtained from the mere pouring of your troubles into a sympathetic ear, the hope instilled by a confident, masterful adviser, can understand the relief experienced by Mr. A.

It is hardly necessary to add that Mr. A. *has* overcome his troubles, that his agonies *are* a thing of the past—they flit across his mind occasionally like the memory of a disagreeable dream—and that he is leading a quite normal and busy life.

—W. J. R.

FEROCIOUS SENTENCES FOR ATTEMPTED RAPE.

Of course attempts at rape should be punished. But one cannot help thinking that the severity of the sentence is sometimes out of proportion to the attempted offence. We cannot help believing that superstition and sadism play a certain rôle in making the sentences as they are. Each case should be tried on its merits, and all extenuating circumstances, if any, should be taken into consideration.

We might not perhaps have dared to say so much, but an editorial in "The New Generation" for September, written by a woman and not by a brute of a man, has given us courage to do so. The editorial is entitled, "A Ferocious Sentence," and follows herewith:

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Sexual superstition takes other forms besides that of hostility to birth control. From the *Glasgow Daily Record* of July 25th we learn that in the Jedburgh Sheriff Court a boy of eighteen, John Oliver Hawick, has been sentenced to eighteen months' imprisonment with hard labor for attempting to ravish a woman of fifty-eight. Hard labor is so severe a punishment that two years is the longest sentence ever given to the hardened criminal. What has this boy done to bring down upon his head so monstrous a punishment? Manifestly the woman was past child-bearing age. The report contains no suggestion that the boy had venereal disease. If the boy had knocked out one of the woman's teeth, and thereby injured her for life, he would probably have been fined five shillings and warned to be more careful in the future. Yet for doing her a far smaller injury he is given the next thing to a sentence of death. We are glad the jury recommended the boy to mercy, although he received none. We hope some civilized person will take the matter up with the Home Secretary, and have the boy released. One good thing has been done. All who are not devils will hate and despise more than ever the vile superstitions which still flourish in our midst.

If it were not unchivalrous to do so, we would like to ask the question whether the woman of 58 was really so shocked and horrified by the boy's attempt that a sentence of eighteen months at hard labor was necessary to soothe and calm her maidenly feelings.—W. J. R.

DANGEROUS ADVICE TO MIDDLE AGED IMPOTENTS

Analogies are dangerous things, and often lead to wrong conclusions. When a man complains of loss of appetite, it is sound advice to tell him to abstain from eating for a while. And a fast of a day or two, or several days, will seldom fail to restore a person's appetite, unless there is something seriously and organically wrong. When a man complains of loss of libido, the advice to abstain may be sound in certain cases, in cases of healthy young men where the loss of libido has been caused by sexual excess. But to advise a middle-aged man who has been leading a moderate sexual life to abstain from all sex relations as a remedy for his diminished or lost libido, is very unsound advice, and may have disastrous results for the patient.

It is one of the commonest things to see men of, say between forty and fifty-five years of age, who complaining of their diminished libido, were advised complete continence, and at the end of their period of abstinence they found themselves completely impotent, so impotent that the strongest stimuli failed to bring about restoration to the normal or near normal.

There can be little doubt that if these same men in addition to the proper treatment had been advised to indulge moderately now and then, their libido would not have become completely extinguished.—W. J. R.

SEXUAL CONTINENCE AND ITS INFLUENCE ON THE
PHYSICAL AND MENTAL HEALTH OF MEN
AND WOMEN.

By William J. Robinson, M. D.

[Continued from the May issue.]

CHAPTER IV.

Case XV. Thirty-two years old. Had been used to an active sexual life. Two years ago was liberated from prison where he spent four year as a political (alleged "obstruction" of the war) prisoner. The lack of sexual satisfaction was what caused him the greatest suffering, physical as well as mental. At times he felt he would go crazy. The longing for the opposite sex was unbearable. Masturbation, to which he had not been addicted prior to his arrest, gave him some physical relief, but no emotional satisfaction. Gradually, no doubt due to the prison fare and the depression caused by the prison atmosphere, his libido began to wane, and during his last year in prison his sexual desire was but slight. On leaving prison, the libido returned, though not to the former degree, but when he attempted sexual relations he found himself completely impotent. Erection very feeble and ejaculation almost immediate. Takes the matter very seriously because he is one of those in whose life sex plays a great role.

Case XVI. Protestant pastor, sixty-eight years old. Powerfully built man. Had no relations up to the age of twenty-five, at which age he married. Lived happily with his wife for twenty years, and she bore him several children. She died. He remained a widower for eighteen years, during which time he abstained entirely from any sex relations. He then remarried. It is five years now since he has been married to his second wife, and he finds himself quite vigorous sexually—just as vigorous and virile as he was at the age of forty. Evidently the continence for twenty years did him no injury—neither to his mentality, nor to his physique, nor specifically to his sexual power. But the man is an exceptional type in every respect; so all those who know him say.

Case XVII. The subject of this case was sent to prison at the age of twenty-two, and he spent two years behind prison walls. His sentence was for a considerably longer period, but a good deal of influence was brought to bear on the Governor and he was pardoned. The crime for which he was sent away to prison was—rape. He found himself in a house where there were only

children, the parents being away in the country over the weekend, and he committed rape on a beautiful, well-developed girl of fourteen. The young man came from a good family, his conduct up to that time had been irreproachable, and nobody would have thought him capable of such a deed. He himself would have been furiously indignant if anybody had imputed to him the possibility of committing such a crime. And up to this day he does not know how he could do it, how he could do such a thing. All he can say is that he was out of his mind, that the desire was so overpowering that he simply could not resist it.

The thought did flit across his mind that he was doing something immoral, something terrible, finally, something that he would have to suffer for, that he might go to prison for—but it was all of no avail. The most painful, most deterrent thought was the fate of the sweet young girl, that she might become pregnant, that her life might be ruined—but it was of no use. It made him hesitate for a moment—but then he went on. He says, and with apparent sincerity, that if he had been quite certain that he would have to pay the death penalty, he would still not have been able to resist and to refrain from doing what he did. A feeling that he never had before nor since took possession of him and completely paralyzed his will power. While he does not question the justice of his punishment, he says that morally he feels himself blameless: his mind was clouded and what he did was beyond any human power not to do. In other words he wishes to convey the opinion that anybody else feeling the way he did would have been unable to restrain himself from doing what he did. Which of course must remain an unsolved question.

Case XVIII and XIX. Mr. J. has reached the age of thirty-eight without any sex experience whatever. He grew up in a small place, the opportunities were few, and he was extremely shy. He would have rather died than make an indecent proposal to one who might be thoroughly respectable. When he came to New York, the situation was no better. And he felt himself getting weaker, losing both his libido and erectile power. He feared that he had become or would soon become completely impotent. And his work began to suffer; he became sort of lazy, indolent; all pep was gone. He never had too much of it, but now he had none. And there seemed to be no help for him, for he had no lady friends, and prostitutes in New York are very few and those few do not solicit in the streets; one has to know the ropes, which he didn't. Luckily, he became intimate with his landlady, a grayheaded little lady of about sixty-five, who gave him complete sexual satisfaction, and he says that he feels like a new man. The improvement has been marked both physically

and mentally. His friend's age does not seem to bother him in the least. He prefers her to younger women, and one who knows him can understand his psychology very readily. Many young men, particularly of a shy disposition and not very strong sexually, prefer old women. The lady in this case, by the way, is very passionate. And she is of course long past the child-bearing age; has been for twenty years. Which is some proof, or if not proof, at least an indication, that the sex instinct was not given us for propagation purposes exclusively.

Case XX. This trouble is purely physical. After going five or six weeks without any sex relations, he would get a heavy dragging-down sensation in the perineum, and on examination the prostate would be found congested. Only a thorough prostatic massage or an abundant night emission would relieve him of the feeling of congestion and dragging-down sensation. Masturbation would but seldom afford slight relief. Occasionally he would also have a dull aching pain in the testicles. Mentally, he claims he is not in any way affected, and if he did not experience the unpleasant physical sensations, continence would not bother him. But the physical discomfort does interfere with his work.

Case XXI. Mr. B is now sixty-seven years old. Was married at the age of twenty; he lived two years with his first wife when she died at childbirth. With his second wife he lived for thirty-five years, and to this, his third wife, he has been married six years. During the forty-seven years, since the day of his first marriage, he seldom missed having intercourse at least once a day. Three hundred times per annum would be an under rather than an overstatement. Two weeks or even one week without intercourse would make him feel physically very uncomfortable, very restless and unable to attend to his work.

How it would have been if he had been forced to go without sex relations for six months or a year I do not know. He would have gotten over his restlessness and uncomfortable feeling. But he was never forced to such a test and he did not see why he should subject himself to it, when he was feeling perfectly well the other way.

But I wish to take this opportunity to remark that there is such a thing as the coitus-habit. Those who become a slave to it feel almost as badly when deprived of it, as the morphine or cocaine addict feels when deprived of his drug. But gradual withdrawal can effect a cure of the habit without too much hardship.

Case XXII. A physician, thirty-five years of age. He practiced intercourse moderately between the ages of eighteen and twenty-four, and his sexual power was normal. At the latter age, fear of venereal infection, mixed with suddenly arisen moral scruples, determined him not to indulge any more until he married. The struggle to overcome his desire was a hard one, but gradually became easier. He would have occasional emissions accompanied with strong erections; but gradually the latter became weaker and the former rarer, until sexual matters almost completely ceased to bother him. If he had a desire or if a lascivious picture presented itself to his mind, he suppressed it ruthlessly by a strong effort of the will. At the age of thirty-four he became acquainted with a young lady whom he was very anxious to marry. But before broaching the subject at all he decided to test his virility. The test resulted in complete failure. He made several attempts with public and semi-public women, but in each case he failed miserably. He could neither get up a desire nor an erection. He is improving under energetic treatment, but it is questionable whether he will ever regain his full vigor, for both the penis and testicles show quite some atrophy.

Case XXIII. Is that of a drug manufacturer, thirty-eight years of age. He is not only a pious but a sincerely religious man, and he considered extramarital intercourse a heinous sin. His passions were very strong, but he never masturbated; he suffered from moderate pollutions accompanied with powerful erections. The erections became gradually weaker, but the pollutions did not increase in frequency. At the age of thirty-eight he decided to get married and came to consult me as to his virility. The sexual organs showed no abnormality, no atrophy. I told him that in a case like this, where he had had no erection, practically, for years, it was a risky matter to pronounce an opinion and that a positive decision could be arrived at by a test only. This, of course, a religious man such as he could not think of doing. He married, and another terrible domestic tragedy (the wife is only twenty-four) has been added to the already fearfully long list. He is completely impotent as far as performance is concerned, though he is not lacking in desire.

Case XXIV. Mr. Z. fifty-one years old. Three years ago began to notice a slight weakening in erections, and particularly a diminished libido. He consulted a physician who told him to abstain for a while; he abstained for six months. At the end of this period, there was no improvement. Not only was there no improvement, but the condition was worse. He consulted another

physician who gave him a tonic and told him to abstain. He abstained for six months more. At the end of that period he found himself *completely impotent*. No desire whatsoever, and when in order to test himself he attempted intercourse, he could not get a vestige of an erection. Repeated attempts resulted—similarly—in absolute failure. It is a dangerous thing, as I stated elsewhere, for a middle-aged man of not very strong sexuality, to abstain entirely for two or three years or even for one year.

Cases XXV. to XLV. I can take these twenty odd cases and put all together; they are so much alike that they do not merit a separate description. Their ages differ from twenty-four to thirty-five. The average age is twenty-eight.

Chlorotic or anemic, poor complexion, acne frequent either on the face or on the body or both. Appetite poor, capricious, sleep poor. Indefinite headaches. Pain at the menstrual period, in some cases so severe that the patient must go to bed for a day or two. Backaches frequent. Constipation very common. Often depressed; some of them very timid. They got married. And the change that several months of married life brought about was unmistakable though not in all cases remarkable. Both physically and psychically the improvement was commented upon by others and cheerfully acknowledged by themselves. The majority of them are now mothers, and in the majority of cases the child has added a new interest to life, and only in a few cases the same ailments followed child-birth. The above cases all give testimony in favor of a normal sexual life.—Truth demands that I add that some of these cases were not really married. They just lived with their male lovers. But biologically it makes of course little difference whether the relations are licit or illicit.

Cases XLVI. and XLVII. Mr. and Mrs. A. Both forty-five years old. Have been married twenty years. Neither of them had any sexual experience prior to marriage. They attempted intercourse a few times but it was not a success. Whether due to weak erections on the part of the bridegroom or a tough resistant hymen in the bride, or both (which is most likely), marriage was never consummated; the lady is still a virgin. Husband and wife sleep in the same bed but all attempts at sexual relations were given up very soon after marriage. But they are the best of friends and pals, and their health does not seem to have suffered from this permanently continent life. [Prof. Blaschko reports a case of a couple who had lived for forty years together without attempting intercourse. When Prof. Blaschko examined the woman—she presented evidences of a tumor—he found that she was still a virgin.]

Case XLVIII. Miss A. Thirty-three years old, from a fine, well-to-do family. An extremely sympathetic girl, with a delicate face, on which the lines of suffering are clearly and painfully visible. She is very chlorotic, lips bloodless, complexion dingy, chest flat, somewhat stoop-shouldered. Complaint: Terribly nervous and hysterical. Has been suffering for ten years or more. I am informed that at about the age of twenty she was stout and exceptionally healthy. She began to lose ground gradually. She has become so nervous that the least little thing makes her cry for hours at a time. Her appetite is wretched, and her insomnia is extremely obstinate. She has been going from doctor to doctor, who has given her every variety of iron preparations, strychnine, arsenic and bromides; for the insomnia she was given gradually increasing doses of sulphonal, trional and veronal. But all these were of no avail whatever. Not that they did not do her much good, but they did not do her any good, except the hypnotics, that procured her an occasional hour or two of sleep. She was sent away to a well-known sanitarium, and while the hydrotherapeutic measures seemed to improve her condition, the improvement was but temporary. During her hysterical attacks she would scream in a most unearthly fashion, tear her hair, knock her head against the bedpost, and then would fall exhausted as if in a dead faint. All about her would get frightened, throw cold water on her, give her aromatic spirits of ammonia, etc. At first they would run for the doctor, but now they are used to these attacks. She has developed recently a pronounced anxiety neurosis. She is afraid of some great calamity. She is also afraid to be in the dark, to be alone in the room, to cross the streets, to be in a crowd. Her people are afraid that her mind was going to give way, but I don't find it so. She is very rational, and a bond of sympathy is soon established between us. Discreet, sympathetic questioning brings out deeper hidden secrets. Seeing that I know her trouble, she tells me what she says she never told to any other living person. For the last ten or twelve years she has been suffering the tortures of hell from unsatisfied sexual longings. The desire would become at times so strong that she simply would not know what to do with herself, she would become as insane, and this would often end in a hysterical attack.

Close investigation brought out the fact that she *never* masturbated. When the various doctors who treated her knew or suspected what was the matter with her or not she doesn't know. She thinks that two or three of them knew. She also told me that she was annoyed or tortured night after night by numerous dreams, some bizarre, some horrible. While I recognize the immortal merits of Freud in having focused forcibly the attention of

our profession—and of the intelligent laity—on the relation between sexual abstinence and the various neuroses, I am but a luke-warm Freudian in the realm of dreams. I believe that in the dream interpretation, Freud and still more so many of his disciples go to extremes, and say things which are foolish, absurd, bizarre, fantastic and grotesque. But in this case it did not require a Freudian to see that the dreams were all plainly and grossly sexual.

I told my patient that it was useless for her to come to me for treatment; I refused to prescribe for her and told her that there was no drug in or out of the pharmacopeia, no physical measures, no electricity, no hydrotherapy, no psychic influence that would be of the least avail to her. There was but one remedy that would help her and that remedy she knew as well as I. And with that we parted very good friends. She thanked me for my frank talk and was glad that I did not give her any medicine. She always felt that in her case they were just a humbug.

Case XLIX. to CLX. These ladies of varying ages have been married for periods ranging from two to thirty years. They claim that they have never had any sexual feeling, do not know what a climax or an orgasm or a "tremble" is, but do not mind it in the least. So at least they say. And they feel all right in every way. It simply does not bother them one way or another. Some would prefer to be left alone altogether; the others do not mind having to satisfy their husbands even if they do not in any way actively participate in the act, but are just passive silent partners. The husbands of most of the wives in this series are all right as far as sex power is concerned and the wives have no complaints on that score.

Case CLXI. to CCLXXV. The cases of this series are similar to those of the previous series in one respect but differ in another respect. They are similar in this respect: they have never had any sexual satisfaction; they have never experienced an orgasm; they do not know what it is; but here is the difference: *they suffer* on account of it. They are irritable, nervous, cranky, ailing and altogether dissatisfied with life. But whether their troubles are really physical due to lack of satisfaction, or chiefly mental due to dissatisfaction and anger over the fact that they cannot experience what other women experience and brag about so much, is hard to decide. It is important to add that the husbands of the wives of this series are quite all right sexually; that is, they can perform the act perfectly, and can satisfy other women; for where the husbands are not all right, there we have another class of cases.

Case CCLXXVI. to CCXCVII. These cases can also be lumped together. Ages from twenty to twenty-nine. Sex does not seem to play any role in their lives, that is, sex in its grosser meaning, a desire for sexual relations. They enjoy the company of the male sex, are not horrified at a kiss, but about their chastity there is no question, and their health does not seem to be in any way affected. They are good students, athletic, cheerful and enjoy life to the full. Their desire for sex relations is but occasional and transient and is more a sort of curiosity than actual desire. Whether their health and spirits would continue to remain unaffected if the chastity had to continue for five or ten years longer, it is of course impossible to say positively. But it seems, that with some of them at least, that would be the case.

Cases CCXCVIII. to CCCXCXIII. If this division included a million cases it would not cover the whole number of women belonging to this series. They haunt the offices of every general practitioner, every gynecologist, every neurologist, every sexologist, every psychanalyst. They are to be pitied, indeed, because there is no question that their sufferings are real, and not imaginary or purely hysterical.

These are all married women, and they all have one trouble—their husbands. Their husbands may be kind and gentle, they may be gentlemanly and refined, they may be loved and respected by their wives, but they have one defect—they are sexually weak. Their most common trouble is premature ejaculations; combined with this is sometimes imperfect or weak erections, and sometimes there is complete sexual impotence. But as just said, the most frequent trouble is premature or immediate ejaculation. Before the woman reaches the orgasm, before she is half-way near it, the man is through, and the wife is left in a highly tense, excited condition, which leaves her distressed for the whole night, unless she relieves herself or her husband relieves her by masturbation. These women are neurotic, neurasthenic, hysterical, irritable; they are apt to act queerly, they have backaches, pain in the ovarian region, suffer from obstinate insomnia and from a host of other symptoms, which follow in the wake of a thwarted, unsatisfied or poorly satisfied libido. They are very unhappy creatures and there is no question that the semi-continence or practical continence to which these women are condemned has a decidedly injurious effect on their soma and psyche.

To the symptoms before enumerated I might add—militant feminism. For it is claimed that no woman who has a happy home and lives a normal, *i.e.*, properly satisfied, sex life cares to engage in outside militant activities or becomes an enthusiastic

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participator in "causes." Be this as it may, lucky is this sort of woman who can engage in outside activities and causes, for they act as some sort of safety valve, some outlet for her unsatisfied libido.

Some may object that these cases cannot be offered as proof of the injuriousness of continence, for these are not cases of complete continence; it is worse to be led to sexual excitement and irritation without satisfaction than to abstain entirely. True; but many of the women of this division do abstain entirely; having suffered from a number of unsatisfactory attempts on the part of their husbands, they refuse to be experimented with any further, and prefer to live an absolutely continent life, even though in the same house with the husband.

And I also wish to take this opportunity to remark that the statement that frustrated or ungratified sexual excitement is worse than absolute continence is true as a general proposition only. In a considerable number of cases the preliminary play, the partially gratified libido, is better than absolute continence without any attempt at sex relations. In the former case there is some emotional outlet, in the latter none.

Case CCCXCIX. Miss N., fifty years old. Had absolutely no relations, no sexual experience of any sort up to the age of forty-four. Was retiring, shy and often ailing. Attended to her school work—she was a school teacher—satisfactorily and was liked by everybody, as a quiet, inoffensive creature. At the age of forty-four she came in contact with a young man ten years her junior and a strong attachment grew up. They soon began to live together, that is, sexually. The change in the woman was remarkable. All her ailments disappeared, her complexion improved, and a buoyancy of spirit to which she had been a stranger for about twenty years made its appearance. Also she began to take an interest in things and movements for which she cared but little before. Her relations with her friend have now continued for over six years, and the improvement in her physical condition as well as in her psyche has been progressive. One would have to be ultra-sceptical to question the reality of cause and effect in this case, to doubt that here there was a causal relationship between the woman's sexual life and the improvement in her condition.

Case CCCC. A dear little woman of fifty-five, ruddy-cheeked, dancing eyes, cheerful as a cricket, always on the go, always doing something for somebody. Never discouraged, never ill for a day. Not a bit prudish; can enjoy a good joke, is

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not afraid to read books which are not sold openly in bookstores. And yet the reporter of this case—the lady in question herself—can assure the reader that she has never had any sex relations in her life, and does not expect to have any. And it is not that she is sexless, that she has not had any sexual longings. Far from it. But a tragic love affair at the age of twenty-five made all men repulsive to her for a while; after that no man that she could love made his appearance. As to illicit relations, she was brought up so, that she could as well consider committing murder. But the important point in this case is that this lifelong abstention from any sex life (she never practiced masturbation) did not injure her physically or mentally, did not even dampen her spirits.

[The concluding chapter of this Essay containing Questions and Answers, Summary and Final Conclusion, will positively appear in the January 1924 issue.]

THE SEXUAL LIFE OF THE CHILD.

[Concluded.]

By Dr. J. Sadger, Vienna.

Somewhat less frequent, but usually very strongly developed in children, is the phenomenon I have called
URETHRAL OR BLADDER EROTICISM:

The distal end of the urinary apparatus, like the gastro intestinal outlet, is an important erogenous zone. Urethral-erotic children find pleasure in the simple act of emptying the bladder, as is shown by their half stupid, half "absent" facial expression,—not unlike what may otherwise be seen during an orgasm. During every act of micturition they experience this pleasure, and hence they develop a pollakiuria which at times lasts for years. Many interrupt repeatedly the act of micturition, having found that the retention of the urine, no less than its voiding, yields a great amount of pleasure. Urethral erotic boys have frequent erections even though they have no desire to masturbate, the condition being induced solely by the heightened irritability of the urethra. Children of three and four years sometime have erections with every micturition, occasionally because they are in the habit of withholding the urine as long as possible, as may be easily discovered. Premature retention as well as frequency of urination in children who are otherwise normal are in themselves signs of increased urethral eroticism. Finally the sexual nature of these peculiarities is betrayed by the stubbornness with which they are kept up, all ordinary methods of weaning or treatment proving useless. The children may be punished ever so severely, yet they do not give up the habit of bed-wetting in the least, but often cling to the habit far beyond the physiologic age until love for one of the parents, or indulgence in regular sexual intercourse during adolescence, frees them from it.

Such children often find that wetting their body with their own urine yields them great pleasure;—in that connection *dermal eroticism*, of which we shall speak at greater length later on, also plays a rôle—and neither threats nor punishments affect them in the least. It is significant also that unless the bladder is overfilled they wet only persons they like, never a person whom they do not care for. The same is true with respect to their fæces. Bespotting the adults seems a sign of favour. Often it is found that children who have learned the art of personal cleanliness, revert to an occasional *enuresis nocturna* or *diurna*, as the case may be. That, according to my professional experience, happens exclusively as the result of increased

sexual excitation, e. g., in girls whose beloved father is about to return home after a prolonged absence. Very significant for one's later life is the parallel of urine and water, or other watery fluids,—a parallel clearly sanctioned by ordinary language. The increased urethral eroticism of many boys in itself is responsible for the attraction so many little ones feel towards anything having to do with water. They love to play with sprinklers, water cans, and pumps, and little girls often never tire of washing clothes for their dollies. In later years these young persons turn with fanatic devotion to water sports or choose marine occupations for similar reasons. Their insatiable interest in the sport or occupation of their choice betrays its sexual character.

On looking over the manifestations of sexual infantilism thus far covered, we find that, excepting the genitalia, they involve only the various mucous membranes. Further observation, coupled with psycho-analytic experience, has disclosed the fact that most mucous surfaces and the whole skin, including therefore also all the special senses, constitute areas more or less erogenous, which is true also of the muscles, as is proved by the study of hysterical paralyses, disorders of locomotion and functional contractures.

These groups of primordial infantile sexuality—after the completion of sexual maturity they usually become less pronounced or disappear entirely—I have designated

DERMAL, MUCOSAL AND MUSCULAR EROTICISM:

An illustration of infantile dermal eroticism we have already seen in Stier's observation that little children give a characteristic sexual giggle when the inner portion of their thigh is tickled, "a stimuli that often leads to an erection." In that connection the child displays that inner relationship between sexuality and the form of dermal excitation known as tickling. To be tickled sometimes yields so great a pleasure that certain children cannot get enough of it, or else, it rouses them so much that they begin to struggle against it even while laughing because they cannot bear it.

A frequent form of mucous membrane eroticism is nose boring which is indulged in usually by children, but often also by adults, sometimes to the point of inducing sexual orgasm. This may be recognized by the dreamy, "lost" expression of the eyes, the flushing of the cheeks and the sudden startled reaction when the sinner is discovered in the act. There are persons addicted to nasal onanism, secretly, impulsively,—and, significantly enough, the habit is accompanied by the same psychic manifes-

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tations (gastric complaints, failure of the attention) which are considered symptoms of so-called true neurasthenia.

The external meatus is also not infrequently a region where masturbation is carried on. Thus, for instance, a hysterical woman who had masturbated for years with the aid of her genitalia, tells me, in the course of her analysis: "Now I masturbate only with the ear, whenever I feel excited. That is a substitute for the real form of self-indulgence and yields me a very satisfying sensation. When I do that with the ear, I also have pains afterwards, just as after masturbating with the genitalia, and there is also a fluid discharge. When my greatly beloved father punished me as a child and I felt unhappy I always consoled myself by masturbating. I went to a place where I would be alone and masturbated either below or with the ear. I did that as far back as I can remember. Often I am much troubled evenings on account of a terrible itching; I then lie down in bed, take a book and presently the masturbation is over. I did the same when I was a child, because the indulgence has always been a great consolation to me."

Muscular eroticism in children manifests itself in a variety of forms, such as shouting, running, jumping, striking,—insofar as any of these actions may be due to purely endogenous excitations. A boy, for instance, suddenly and without any apparent reason, begins to run or shout, in response to an irresistible impulse to enjoy himself in that manner. Another manifestation of muscular eroticism is the pleasurable beating of very young children, not in anger or during a dispute, but rather as an outflow of infantile love. Very significant also is the fighting and "rough house" indulged in by school boys. A little slip of a fellow catches hold of another boy, on some trivial pretext, or even without any, and starts a spirited fight, in order thus to find an outlet for his powerful sexuality. Many persons definitely recall having experienced their first orgasm during such "rough house" combats. And even the one who loses the fight and is badly mauled does not feel so much anger and pain as a sense of gratified libido, even though he may not be otherwise at all masochistically predisposed.

These manifestations of infantile eroticism have two characteristic features: they are extra-genital and autoerotic, *i. e.*, the child's sexual feelings are not aroused through the excitations of the sexual organs proper and, furthermore, for the attainment of the libido the child does not require another objective, on the contrary, he derives pleasure through his own body.

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We take up, next, symptoms of infantile sexuality which differ from these with respect to the latter characteristic.

I have already referred to the erections of our special senses. In addition to the dermal, there are two other important forms of eroticism belonging to the same category: eye and nose. The eroticism of vision leads to

EXHIBITIONISM:

That of the nose to *olfactory eroticism*. The pleasure in being naked, the craving to show oneself naked before others, is common to all children. This begins early in infancy and keeps up approximately to the end of the fourth year when the reactive repression sets in, with girls at least, and the emotion of shame begins to assert itself. Before that time every child, in the language of adults, may be called shameless, *i. e.*, every child displays keen pleasure in uncovering its body, with particular emphasis of the genitalia. For instance, we may see a little girl lifting its dress in the presence of a stranger, or sitting so as to expose its genitalia, if she likes the stranger. Most little ones—this we learn through psycho-analysis—like to take advantage of the need of attending to their bodily wants in such a way as to exhibit themselves before sympathetic persons, particularly before their parents. And as a rule it takes some time to inculcate the sense of shame in the child. Remnants of this pleasure of exhibitionism persist throughout life. Women, for instance, are particularly adroit in exhibiting their charms, which they do in cryptic ways and whenever the opportunity presents itself in quite open form as well. Indulgence in alcohol, removing one's inhibitions, easily puts an end to the feeling of shame. The same is true of a psychosis which frees the unconscious from the fetters imposed by culture. Even the most modest of girls, the one who otherwise avoids the least intimate contact with a man, once her inhibitions are cancelled, as in mental disease, endeavors to entice the male by the exposure and the display of her charms—as during childhood. Finally, the typical exhibitionist is a person in whom the aboriginal infantile pleasure has become fixed into a permanent desire.

Exhibitionism, *i. e.*, the craving to display oneself, is clearly an outflow of the erogenesis of vision. The latter presents two aspects: passive and active. The passive pleasure of being seen becomes very early combined with an active desire to see others exposed, namely, in the child, either spontaneously or through initiation into the habit. Usually the habit begins with the child narcissistically admiring its genitalia or its nates and that leads it to try to see the corresponding parts in others. Cases of ex-

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posure by playmates are relatively rare and so are also instances of witnessing the exposure of adults, at least in the so-called better homes. The child gratifies its sexual curiosity most easily during the satisfaction of bodily wants, therefore a child with a pronounced exhibitionism easily becomes a *voyeur*, watching with keen interest other children as well as adults in the act of attending to their wants. Again, in such cases the childish craving sometimes becomes fixed into a so-called perversion, and this holds true not only of the adult voyeur, but also of certain homosexuals and fetichists.

A few illustrations of exhibitionism: most little boys want their mothers to take them to the water closet, and because of their "innocence" this demand is usually granted them. A girl, five years of age, in good health, keen-minded and of very good family, is told the "Schneewittchen" story and hears that her father loved her very, very much. "How much did he love her?" asks the little girl. "Did he do that because he loved her so?" And, finally, as the highest expression of love: "Did he also take her to the water closet?"

Another illustration: A doctor was called to a nurse who was ill with a gastro-intestinal form of influenza. The moment little Hans, six years of age, saw the physician coming he could hardly be kept from listening secretly at the door. Afterwards he plagued the convalescent woman with the question: "How did the doctor examine you? Dear Johanna, I'll give you anything you want, if you will only tell me: what did the doctor do to you?"

Perhaps the behavior of the parents is responsible for a great deal of this sexual exhibitionism. They are so thoroughly certain that their little one is unaware of anything sexual: "What does a child know about sex matters?" is the answer if one dares raise a question, or else scornfully: "My child, I will have you understand, knows nothing about such things!" And because it is so "pure-minded" the child is taken every morning into the parents' bed where it sees often more than it is credited with noticing; later on the mother does not hesitate to prepare her toilette in the presence of her fairly grown up boy. Indeed, sometimes the young man is required to act with complete freedom during his own toilet in the presence of the other members of the family, the parents perhaps setting an example. Of course, neither he nor his mother is supposed to experience the least sexual feeling in that connection. Afterwards if the son becomes severely neurotic, it is astonishing to find how far the parents' self-deceiving blindness may go.

Not infrequently the mother's unconscious exhibitionism co-

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operates with and fosters the child's craving to see and her careless behavior accentuates the child's tendency. Thus some of Stier's cases are not at all difficult to understand, and I shall quote two of them by way of illustration. The first, a seven year old boy, has for some time past been sexually aroused upon witnessing his mother undressing, particularly if he sees her breasts. She therefore has him sleep in the next room; nevertheless he utilizes every opportunity to watch her dress or undress, and even to look under her dress. The author comments on the case as follows: "The objective of this child's sexual curiosity happens to be his mother, but that naturally need not be looked upon as characteristic and is in no sense to be taken as corroborating Freud's ideas. We must regard it merely as a *Fehlgreifen im Object*, an abortive objective, due to the child's complete isolation from the outside world, just as homosexual or sodomistic acts in prisons, in the foreign legion, or on ships are not in themselves an expression of a perverted sexual instinct." Next he records the case of another seven-year old boy who began having erections after the first year and now "often tries to lift the mother's dress so as to see her body"; more than that, he has "lifted the covers off his mother while she was asleep and seized hold of her genitalia." According to Stier all this is but a "precocious, purely instinctive interest in the other sex." (? !)

Neither so common nor so serious as to consequences is the child's sexual

OLFACTORY EROTICISM:

It is well known that the sense of smell is not nearly so well developed in modern man as it was among his progenitors in the mammalian species. That is true also of the rôle of olfaction in man's sexual selection; among the lower animals the specific sexual odors are the most powerful factors of attraction. Nevertheless, even in man the sense of smell is not without its significance, as Hagen has shown in his "Sexuelle Osphresologie." The coprophiliac tendencies of children, for instance, as well as of perverts, depend largely upon olfactory eroticism. In connection with that form of eroticism we find the so called "Poporiecher." The little ones addicted to this habit distinguish between pleasant and unpleasant smells in the regions of the anus. Other children of this type like to bury their heads in the mothers' axillæ, or under the arm of other adult women, because the aroma of the armpit secretions appeals to them as pleasurable. I know from the analysis of certain homosexuals who even during their childhood were able to distinguish be-

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tween the ante-pubertal and post-pubertal preputial odor, and therefore turned their belongings exclusively towards the riper young men. Freud has called our attention to another feature: the odor of the secretions between the toes in certain persons and the aroma of women's hair are perceived by certain foot and hair fetichists very early in childhood, and that, of course, discloses a great predisposition for the perversions in question.

I quote here from the analysis of an autoerotist, 27 years of age, who also suffered from pronounced foot fetichism, the following passage illustrating the emphasis of early olfactory eroticism: "At the time when I had scarlet fever (five and one-half years of age) I was in the habit of sticking my hands between my legs, where they perspired freely, and then enjoy the smell of them. I was also fond of smelling my armpit sweat, in fact, all my bodily odors, even that of the hair-brush. Occasionally I stuck my finger into the anus, for instance, if I felt an itching in the parts, and I never failed to smell the finger afterwards. I am fond also of the odor of flowers and I select soaps with reference to the scents I like best. At nineteen I became interested in the manufacture of perfumes and I experimented by mixing together the various toilette waters on mother's dressing table. I have an idiosyncrasy for certain odors. For instance, if I smell turpentine, an outbreak appears on my skin all over the body. Five years ago I had to be chloroformed for an operation (for rupture) and for a year after that whenever I opened an old box, the musty odor immediately brought back to my mind the chloroform odor. Other odors too remind me of it, and therefore easily intoxicate me. I trace to that peculiarity distinctly my dislike of Rhine wines because they possess a strong bouquet. . . . Since the operation I prefer to avoid all Rhine wines. . . . I still have a liking for the odor of perspiration, and I may have likewise cared for the odor of urine and fæces, but later on that partiality must have been repressed. In my fetichism olfaction still plays an important rôle but at the same time I must confess that the pleasure depends chiefly on the associated idea of compulsion inasmuch as I fancy that some one is compelled to wear clothes having an unpleasant odor. If I sit in a coffee house and a man's back is too close to me, that always irritates me; I feel uneasy at the thought that perhaps I may perceive some odors. It is precisely like my fear of the penis and likewise founded upon an infantile basis. It seems as if I had been in the habit of smelling brother, and perhaps also mother, and that now disgusts me."

I must mention next a determinant belonging half-way only

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to the sexual instincts, and half-way to the instincts of self. I refer to

CRUELTY:

When this peculiarity is associated with pleasure it gives rise to the well-known perversion of sadism and masochism, which often plays a tremendous rôle in later life and is also not unknown in childhood. The cruelty trends depend chiefly on the sense of power. "But children which show marked cruelty towards animals and during play, usually rouse the justified suspicion that certain erogenous zones are intensively and prematurely brought into sexual play. The suspension of the sense of pity, which develops relatively late as a sort of barrier, entails the danger that this linking of cruelty and erogenous instincts during childhood may prove indissoluble later in life" (Freud).

Direct observations on children have taught us that even the infant perceives pleasure instead of pain in response to such stimuli as mild biting and scratching and that, consequently, we must regard the increased dermal and muscle eroticism thus disclosed as one of the roots of sado-masochism.

It is well known that children take great pleasure in tearing the wings or limbs off flies or butterflies cutting the chafer's feelers, and in other such deeds. The incentive to these deeds is disclosed more plainly in connection with another cruel act, to wit: the tearing apart of animals during copulation, which children often do with such harshness as to cause a rupture of the male membrum. Feelers, (antennae), limbs, and wings, of course, are symbols for the penis, as we know from the examination of neuroses and from the analysis of dreams, so that tearing or cutting them off is equivalent to castration.

The above features do not by any means exhaust infantile sexuality. The child has at its disposal also other means for attaining sexual pleasure,—for instance, rhythmic mechanical motions of the whole body, imitations of flying, etc. Restless children are put to sleep by cradle rocking and consequent sexual gratification. "The rocking of the carriage and later steam-car riding have such a tremendous influence upon older children, that all boys at least, some time or other in their lives, entertain the wish of becoming conductors or drivers. Railroad experience rouses in them a mysterious interest of extraordinary intensity and that is exquisitely adapted to assume the role of a sexual symbolism during the age of phantasy weaving (specifically the pre-adolescent age)" (Freud). The highly pleasurable quality of vestibular stimulation is indicated by the fact that most

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children cannot have enough of games of flying and other plays similarly involving rhythmic motions of the whole body, such as "Tellerreiben." others again, love to revolve on one foot faster and faster until they are in danger of losing their balance. The insatiable character of the attraction of such games discloses their sexual nature. Finally we need only watch the great amount of delight taken by children as well as adults (especially girls) in roller coasting in order to appreciate the sexual character of this form of stimulation.

Less known is the fact that all affects, after attaining a certain height, approach the sexual realm, and that is true also of such emotions as fear, worry, scare, horror, which on their face are anything but pleasurable. One of my patients with a pronounced urethral eroticism felt locally (*i. e.*, in membro) the greatest delight of his life when, at 13 years of age, he once appeared late in the class room (conducted by a very strict teacher) and saw by the school clock that it was already half an hour past the beginning of the recitation period; this patient, in his own words, "would give half his life" to be able to experience over again such a delight. Many young persons (boys) experience a pleasurable sensation in the genitalia, which often leads to masturbation, when they face the ordeal of examination, or when they find themselves baffled in the class room by some mathematical problem or by some other (translation) task. Many adults too experience a pronounced sexual excitation in connection with the stronger emotions, including those otherwise of a rather unpleasant character.

The attraction of the stage depends largely, and the appeal of sensational pieces directly and wholly, on the concomitant sexual stimulation, and this is also experienced by young children who want to hear over and over the gruesome fairy tales and stories. All concentration of mental energy, every tension of the faculty of attention may rouse a similar concomitant sexual excitation in young persons, as for instance, students who prepare for examinations, and may thus become the cause of the so-called "nervousness" usually attributed to "mental overwork."

V.

This outline of the sexual life of the child must not be concluded without some reference, however brief, to the theme of LOVE:

I use this term in its more restricted sense. Of course, actual physical aggressions are occasionally met with among children no less than among adults and that sometimes without the limitations imposed by the horror of incest. A couple of illustrations

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from everyday practice serve to illustrate the theme. A boy, at three, suddenly turns upon his girl cousin, approximately of the same age, right in the middle of the road, embraces her passionately, kisses her, and exclaims: "I must kiss you, I love you so!" A boy of seven continually cuddles up to his pretty nurse, wants to embrace and kiss her all the time, at night wants to crawl into her bed and is jealous of every male that comes near her. A mother tells me about her four year old boy: "I must not undress in his presence, it rouses him sensually; he jumps up, grabs me around the thigh and shouts with great passion: 'Mammi, mammi, mammi'!" If I tell him 'that is not nice,' he lets go but comes back every time. He jumps on his grandmother's lap (she is a woman of fifty, with well developed breasts) and tries to play with her breasts. I bought him a pair of Tyrolean leather boots having buckles on top. Recently he unbuckled them and said to me: Mammi, take the 'Lulli' in your mouth."

Among hundreds of American children, boys as well as girls, not older than two to four years, Sanford Bell has traced directly formal love relations, exclusive of course, of the final genital consequences. These children embraced and kissed their companions, pursued and hugged one another, were persistent and jealous, precisely like the adults. In his "*Physiology of Love*," Montegazza, states on the basis of personal observations: "I recall the angelic figure of a blonde, rosy-cheeked girl whom I once saw fling herself on the neck of a devilishly wild, dark complexioned young man. She covered him with kisses; and though this display of tenderness annoyed the boy, she kept it up, assuring him of her love and telling him that she wanted to be his bride. . . . The prettiest of girls, determined by a half kindly, half cruel nature, to rouse longing and to inspire sighs at every step, often knows not that among her fervid admirers there is many a shy young man who kisses secretly the flower that happens to fall from her bosom, young men, who, like secret thieves, hurry to the room just vacated by the angel of their dreams, to kiss the bed and to kneel upon the rug where that angelic woman's feet have rested, whom they place above all other creatures, whom *they even dare to compare with their own mothers*. The woman who plays with a child's locks often has not the least notion that while she lets that head rest upon her lap, a little heart is thumping in response to her love pats, and little does she surmise that when the child raises its head, the flushed face is not a posture congestion but the result of a mysterious flame, the flame of love which it knows not yet to recognize."

The autobiographic records of writers are particularly illum-

SEXUAL LIFE OF THE CHILD—SADGER

inating. For instance *Stendhal*, that expert anatomist of all human passions, states, in his "*Confessions of an Egoist*": "I was always in love with my mother. I wanted to kiss her all the time and wished there would be no clothes. She also loved me tenderly and often took me in her arms. I kissed her passionately, with so much fire, that sometimes she felt compelled to avoid it. I despised my father, if he came near and interrupted our kisses. I always wanted to kiss her on the breasts. Try to appreciate my plight upon losing her when I was not quite seven years of age. She passed away in the bloom and beauty of youth. Thus, twenty-five years ago I lost the being that I loved above everything else on earth." Again Fr. Hebbel, in his autobiographic account, "My Childhood," relates how, on the occasion of his first visit to a school, in his fourth year, he felt a tremendous fear and did not dare lift his head. When he finally did so his gaze alighted on Emilie Voss: "A passionate trembling seized me, the blood rushed to my heart, but a sense of shame also mingled with this first awakening of my feelings, and I at once lowered my lids as if I had committed some great breach. From that moment Emilie never left my mind; school, which formerly I dreaded so much became my favorite place of enjoyment, because I could see her only there. Sundays and holidays were hateful to me because they kept me away from her and I felt thoroughly unhappy whenever she happened to be absent. Her image floated before my vision wherever I went and wherever I stood, and I never tired repeating her name to myself whenever I happened to be alone; her black eyebrows and her red lips particularly haunted me, but I do not recall that her voice had made an impression on me, although later on that was what particularly held me in thrall. That I soon acquired the reputation of being the most regular attendant and the best scholar goes without saying, but I was far from feeling easy or proud over it, for I knew too well that "it was not the horn-book that drove me to Susannah" and that I studied my alphabet diligently not because I was eager to learn to read! But I wanted no one to suspect what was going on in my soul, Emilie least of all; I avoided her most painstakingly so as not to betray myself; and whenever children's games brought us, nevertheless, into close contact, I displayed unfriendliness rather than friendship towards her; I drew her from behind by the hair, just so as to touch her, but did it in a way to cause her pain so as not to rouse any suspicion . . . That attraction lasted till my 18th year." Particularly striking in this account is the fully developed love emotion in a little boy, being roused as early as the fourth year. But for the references to the

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age and to the attempt at learning the letters of the alphabet, one would take this to be the account of a love at first sight, for a fully developed young woman, on the part of a young boy in the "calf love" stage.

Subsuming what has been brought out thus far, one thing is certain: The child's alleged "purity," *i. e.*, the supposition that the child neither knows nor feels anything sexual, is a myth,—such a state of ignorance or indifference is a fiction of the adult mind. Anyone who is displeased with this conclusion need only bear in mind that a sexually unawakened child is a child unawakened all around. We may confidently assert that every child's mental development runs parallel with its sexual awakening. Any one who wants a bright child, must not expect of it sexual blindness.

NOTES ON THE PSYCHOLOGY OF THE PSYCHO-ANALYST.

By B. S. Talmey, M. D.

The basis of the Freudian psychology is the subconscious mind and pansexualism. Both theories are true but not entirely new. Since the dawn of its history philosophy dwelt upon the psychology of the subconscious. Edward V. Hartmann, in his *Psychology of the Unconscious*, has anticipated Freud even to the nicety of Ratiocination. Subconscious ideation is no new doctrine. Not a few observing individuals have experienced this ideation in themselves and have surmised its influence upon conscious action. Neither is pansexualism new to a mind that is philosophically inclined.

A glance at Nature shows her to be most careful and painstaking in her task of promoting the propagation of life. From the monera to the highest animal, Nature's only aim seems to be the creation of new life. Already in the gastrula stage, nature stores away a number of cells to serve as gonads in the interest of the following generation. Nature shows the greatest anxiety to secure the perpetuation of the kind. For every pistil there are thousands of pollen grains. The newborn girl harbors in her ovaries about sixty thousand egg-cells, and every male ejaculation contains more than two hundred million spermatozoa, though only one is necessary for fertilization.

Metaphysically, therefore, the germ-cell is the all-important thing in life; it is the element, transferred from generation to generation, from age to age; it is the immortal part of life. The everlasting force in life is lodged in the germ-plasm.

PSYCHOLOGY OF THE PSYCHO-ANALYST—TALMEY

The individual, or the colony of cells called plant or animal, seems to exist only for one purpose—at least philosophy has as yet discovered no other aim in life—the production of germ cells. The individual grows till the specific cells are mature for impregnation. When the task has been performed, and the germ-cells have lost their usefulness, senescence sets in. The individual withers and disappears. The somatic cells represent a mere physical temporary frame, a constantly decaying abode for the reproductive cells. The soma is of value only as a dwelling for the germ cells. When the object of the species has been accomplished, the soma may go. The germ cell is immortal, the somatic cell leads a temporary existence. The soma must furnish the food, heat, or energy, necessary for the growth and development of the germ cell. When the latter needs the host no more, when the germ cell has accomplished its task, then the host has outlived his usefulness, he decays and dies. With the first heroic act of insemination, the finale of life's tragedy already commences. The tender outbreak of the first bloom of erotic passion is the foreboding of the beginning of the last act of life's symphony. Sex is thus the primary modality of life.

Metaphysically, therefore, it is not to be doubted that sex permeates every living organism, be it plant or animal. From the phylogenetic point of view, every organism is drawn to perform its task in life by the phyletic cellular memories, manifested in the hunger for eternity. But practically, in an ontogenetic sense, the main conscious labor of the organism is concerned with the soma, the germ cell playing a subordinate or only temporary rôle in the organism's daily achievements. Especially is this true in man in whom sex is the least expression of life's highest form. In man sex, in a large degree, ceases to be an instinct, driven by a higher power, it sinks to the level of an amusement, existing merely to furnish pleasure. The desire for offspring dwells far away in the remotest background of conscious volition.

But even in the plant where the life urges, the impulse to the preservation of the individual and the impulse to the propagation of his kind, dwell pure, following only an unconscious force, even in the existence of the plant, the propagation of the kind occupies a small part of the plant's life and activity. It takes years for the seedling of the tree to sprout out of the seed and to appear above ground. It takes more years before the tiny twig grows up to a respectable tree. Every spring it closes itself with green foliage, adds a little to its growth, and goes to sleep again in the fall. All

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this time its only task is to build up its own body, to preserve its own individuality. Suddenly, one spring day, sex appears. The genital organs, stamen, anther and pollen, the male organs, and pistil, style, and ovary, or the female organs of propagation, are unblushingly exposed to the gazing eye. These organs are surrounded by a set of multicolored beautiful petals, inviting the insects to the nuptial jubilee. While the invited guests, the bee, the butterfly, the wasp, and bird are feasting upon the nectar at the wedding, the heroic act is fulfilled, the pollen is brought into the arms of the stigma. When insemination has been accomplished, the wedding feast is over. The plant divests itself of its nuptial garments. The petals fall to the ground, the wooing is over, and the plant devotes the rest of its aestival life to the task of building the fruit, the seat of the seeds for the next generation.

Thus even during the time of its full growth, the sex factor occupies only a short time in the life of the phanerogamous plant. It is in bloom only for a few weeks. For the rest of the year there is an entire lack of sex expression. The sex organs quickly disappear and remain absent. Still the plant continues to exist and occupy itself with its own preservation.

What is true of the plant is, in a still higher degree, true of the animal. Its sex life only begins after it has reached its full growth. From the moment of its birth, the animal's striving is aimed at preserving its own individuality. Only after a considerable part of the higher animal's life has been consumed, the sex factor appears, and the rutting season sets in. The exertion in the interest of the species is then in the foreground. But this season is of short duration, counted only by days. Even if there be lack of opportunity for sex expression, rutting is over after a week or two. If fertilization has taken place, oestrus disappears immediately in the female. Even in the male, the sex factor does not seem to involve any longer period than that of the female. The male sex experience depends upon female stimulation and consent. He is indirectly bound by her short rutting period.

Thus in the plant as well as in the animal, the sex urge, in a pragmatic sense, occupies only a very small part of the individual's life. To say that the main factor in human life is sex, as often heard expressed even by the non-Freudian, is to ascribe to man an exaggerated volupty, not found in plant or beast. Such a volupty is unnatural and could scarcely exist in normal man.

In the first years of man's life his striving does not involve the sex factor at all; at least, since time immemorial man has never observed any sex manifestations in the normal child. When puberty sets in, in the years from twelve to sixteen of the child's age, man experiences erotic feelings. He is attracted by the opposite sex, but if not seduced by bad examples, seldom with a genital orientation. Man is in love with love. The desire for genital experience sets in much later.

But at that later period, other specific human desires appear upon the horizon. Man distinguishes himself from the animal by being a "homo faber," a maker of tools. He excels by the invention, or the fertility in the invention, of new means to subject nature to his will. Man is a creator of civilization, a civilized being, even if he be a barbarian or savage. The gulf between the highest animal to the lowest human savage is much wider than between this savage and the highest civilized Caucasian. But although man is a timebinding creature, as Korzybski puts it, (Alfred Korzybski, *Manhood of Humanity*), still every man has to pass not only through the zoological phylaxis but also through the entire evolutionary course of civilization. The acquisition of this knowledge occupies the greater part of his lifetime, to such an extent as to crowd out extreme genital desires. Furthermore, man is not only a child of civilization, which means the subjugation of nature to his service, but he is also a child of culture, which means the subjugation of himself, his own desires and inclinations. As a cultured being, man has evolved certain inhibitions which tend to regulate and keep in due bounds his primary emotions, such as hunger, fear, hate, rage, and sex. By restricting these desires which he shares in common with the animal the specific human desires are given free rein of development.

Man is further governed in his behavior by a certain number of urges, connected with the herd-instinct. There is, in the first place, the desire to excel among the members of the group; but he can not always excel by natural endowments, by the gifts of nature, such as beauty, bodily charms, strength in body and mind. He has to acquire certain excellencies, hence man's love of knowledge, whether in sport, science, art, or poetry. The acquisition of such knowledge requires hard study and great effort and tends to occupy man's entire period of adolescence. It ought to leave very little leisure for thoughts of genitality.

Another peculiar human quality is man's love of appreciation by the group. It is this love of appreciation through

bodily excellence or mental power which drives the little girl to beribbon or beautify herself, or causes the little boy to show off in his games before his companions. It is not always to capture a mate that woman shows so much concern about her beauty or the man about making a name for himself. It is the love of appreciation, which controls their actions. It is this love which keeps the artist at his palette or chisel, or the poet at his pen and inkwell.

The greatest human urge which governs man's actions is his will to power. It is this will to power which induces young men to enter military schools, to become officers who command men. The remuneration is comparatively small, the examinations exacting, still the youth of the land flock to these schools, whence they hope to emerge as commanders over the other members of the group. It is the same will-to-power which induces many a young man to study medicine. The preparation and the study of the art of healing consume years of arduous work. After graduation it takes again years of struggle and disappointment before the young Aesculapian can make a comfortable living. In any other business he would have succeeded much quicker. Why then does he choose such a profession? Because as a physician he wields great power over patients and, in a certain respect, over nurses. In the choice of the profession of law, it is again the dream of a judgeship with its tremendous power of injunction or of contempt of court proceedings which induces the young man to endure all the hardships of study and later of the competition in an overcrowded calling. Even the captain of industry is more intoxicated by the power he wields over his subordinates than by what money can buy. In the poorer classes the young man chooses the calling of the policeman for the power connected with this office. Even the girl's dream of a home is centered upon a place where she will reign supreme over husband and children, whose absolute queen she expects to be. The conception of genitality seldom enters her mind.

Thus the greatest part of man's occupation is concerned with the life-urge of the individual and is far remote from the sex-urge as commonly understood by the practical man in the street. Still we are fed by the Freudian on sex-lore, as if sex was the only thing that controls man's life and actions. To be sure, some Freudians, especially those who are philosophically inclined and did not choose the psycho-analytic specialty for the money there is in it, put forward the claim that Freud's conception of libido is of a metaphysi-

cal nature. But the metaphysical conception of sex or of libido is of no practical value in the etiology of the neuroses. Here it is genitality and its preliminaries, such as kissing, caressing, etc., which are of importance. Only those forms of love which are looked upon as immoral can cause any conflicts, repressions, and defence reactions. Only the conventional meaning of the sexual can call forth a conflict. The driving forces which, according to Freud, find expression in the formation of symptoms are genital in nature. If any neurosis be the result of a conflict between the ego and the sexual impulses which it had repudiated, sexuality and genitality must be equated only genitality may become the dynamic factor in the formation of a neurosis. Metaphysical sexuality can not cause a conflict. By no stretch of the imagination can the mother, suckling her infant, be considered as being occupied in a sexual act which could call forth a conflict. Still her action is surely due to the metaphysical libido or the *elan vital*. To take the philosophic or metaphysical conception of sex, apply it to everyday affairs, and manipulate it to suit either the philosophic or genital libido is sophistry run riot. Hence in a practical sense it is not true that man is nothing but a sex animal, that every thought and action of his is directed at and controlled by the desire of insemination.

What is new in Freud's doctrines has not been proved to be true. The two main pillars upon which the entire psycho-analytic edifice rests are (1) infantile sexuality and (2) the erotic dream. Neither of these two concepts is true, at least their truth has not been established by incontrovertible tests. It needs more evidence than the confessions or fabrications of the neurotic to extend the sex-life of man to the suckling period to make of the child one mighty, rhythmic throbbing creature of sex. Neither will the obiter dictum of the greatest master persuade the world that every infant is manifestly sexually perverse, that because the "*osculatio*" or "*suctus mamillae*" by the adult is a sex preliminary, therefore the infant's act of sucking is based on the sex-urge and not upon the life urge as in every young animal. Still Freud himself compares the infant's well-being after a hearty meal with the adult's state after a sex experience, the bodies of both of them being still enveloped in the unknown deadly rhythmic sex sweetness.

This one comparison by the master himself stamps the infant's sexuality as genitality. It is genitality pure and simple which has been made the pivot around which the psycho-analytic doctrine turns. All the metaphysical inter-

pretations of libido cannot dispute away the genital conception of the infant's incest, exhibitionism, homosexuality, etc. There is no such thing as metaphysical incest, philosophic exhibitionism, or psychological homosexuality. These three anomalies are either of a genital nature or they are non-existent and the conception of an infantile genitality runs counter to plain common sense, to all human experience, and to all accepted beliefs and tenets of science.

The "ipse dixit" even of the greatest mind is not authority enough to persuade mankind that childhood, living in the enchanted land of dolls, games, nursery rhymes, fairy tales and in glorious pretended adventures, is all this time battling with the task of unravelling life's erotic mysteries. The idea that all the games of the child are invented by its hypocrisy only to veil and mask the child's true genital thoughts is a conception which runs counter to mankind's experience. No animal before puberty is occupied with sexual pursuits. Why should man be? If man really is, why has mankind for generations past never noticed it until Freud came with his *obiter dictum*? What proof has the Freudian to offer of the existence of infantile sexuality except the hazy, partly suggested, partly invented tales and reminiscences of the neurotic, all betraying a considerable digression from the truth to him who has eyes to see and is not entirely blinded by the exuberance of his own phantasies and subconscious desires. Such evidence is surely no valid proof for the existence of genitality in the psychology of the normal child.

Now, if infantile genitality is removed from the psycho-analytic psychology the entire Freudian edifice falls to the ground. There is no other basis left; the foundation is destroyed. With the removal of infantile genitality, the Oedipus complex, the inferiority complex, the castration complex, and all other complexes, rooted in infantile sexuality, disappear. The entire ingenious doctrine topples over.

The second pillar of psycho-analytic psychology is the dream-psychology of Freud. According to the enunciation of the master, every dream represents a wish-fulfillment which clashes against the shell of customs, acquired by the group to curb the self-will of the individual. That some dreams, in their manifest contents, do represent wish-fulfillments was known since time immemorial. All the combats in the Iliad are the result of Agamemnon's dream of victory. The hungry one often stands in the midst of plenitude of food, and the thirsty one feasts his eyes on sparkling fountains.

But there are other dreams which represent the very opposite of a wish-fulfillment, *e. g.*, the death of a beloved parent. Hence

a "deus ex machina" had to appear, the new doctrine of the latent dream content, of the censure, and of dream symbolism. But what is all this apparatus for? The answer is to facilitate sleep. This conception of the teleology of the dream is repugnant to the modern thinker who is not quite sure about the teleology of life and the world itself. Neither in Darwin's variation nor in Lamarque's transmission of acquired characteristics nor in Bergson's creative evolution is any room for teleology. We would have to turn to theology to account for the dream's teleology. And what about the animal's dream? Are there also unconscious wishes in the psychology of the dog which have to be censored to facilitate canine sleep? Are the dog's dreams also sex-dreams, veiled in symbols? We need only to pass in review the symbolism of the dream (*vide* Talmey, *Amer. Medicine*, May 1919, p. 257) to see its absurdity, its utter disingenuousness and ridiculousness. Especially the claim of Freud's foremost disciple (Stekel in *Sex and Dreams*, p. 40) that there is no anerotic dream is preposterous, inconsistent with the plain dictates of common sense. But there is no need for the enumeration of all the new unproved principles or all the fantastic symbols, introduced into the mechanism of the dream, to refute the soundness of the new dream interpretation. The teleological conception of the dream without a personal theological directing Spirit behind it is unlogical. The elaborate structure of dream interpretation, therefore, does not belong in the realm of science, it belongs in the realm of religion. No true scientist can accept the doctrine of the deep significance of the dream.

The worst feature of the latent dream-content is its alleged origin in unconscious ideation (*vide* my definition of the unconscious and subconscious in *Amer. Medicine*, March 1923), which in turn is derived from postulates, traced to infantile sexuality. If infantile sexuality, the cornerstone of the Freudian psychology is removed from the elaborate psycho-analytic structure, then the doctrine of the Freudian unconscious tumbles down in a crash.

The Freudian unconscious is not what is commonly understood by this term, *i. e.*, the subliminal psyche where dwell all inattentive happenings, old memories, and forgotten events, recallable by some means such as by the association of ideas, by hypnotic, or psycho-analytic suggestion. In the Freudian unconscious rage fiercely the most revolting sexual and criminal instincts. The Freudian unconsciousness is a veritable cesspool of iniquity where the anti-social, immoral, and criminal thoughts are stored away. Here dwell all incestuous desires, exhibitionistic wishes, homosexual longings, here the son's hatred of his

father, here the daughter's jealousies of her mother. Here are chained down man's inclinations for rape, arson, and murder in the deepest corner of his tartarus, watched over Cerberus, the cerebral censor of man's morals. Here are these iniquities, acquired in infancy, in constant combat with the three-headed canine trying to escape into conscious thought. They often do escape, we are told, in the disguise of symbolism, of mannerisms, of behaviorisms, of inclinations, etc. Especially in dreamland do they achieve their greatest triumphs. In dreamland, Cerberus himself is half asleep and lets them transgress the threshold of their prison, provided they are properly masked.

This is the Freudian unconscious, replete with infantile sexual iniquities. Remove the unproved infantile sexuality, and the entire elaborate structure of the unconscious is demolished and, in its ruin, drags down all the latent dream-contents, complexes, defence-reactions, etc. The basis of Freud's psychology, the foundation of his entire doctrine is infantile sexuality and the latent dream content. Both are unproved and entirely new. They are new, but are they true? That is the question.

But even if Freud be mistaken in his claim about the contents of the unconscious mind, still he will go down in the history of medicine as one of the pathfinders in medical psychology. If he has not discovered he surely has resuscitated the psychology of the subconscious from its lethal sleep among many another forgotten philosophical theses, stored away in the dusty volumes of some old libraries. It was he who introduced the psychology of the subconscious into the domain of medicine and taught it as one of the most important disciplines of medical science.

A CASE OF PARANOID HYSTERIA.

[Concluded.]

By S. A. Tannenbaum, M. D.

Session 16.—[Six weeks after her last session.]. I am crazy; now that I'm here I'm feeling better. There is nothing wrong, nothing more than usual; nothing has happened. I've been feeling lots better, except when I was laid up with a sore throat for three days. I am *sleeping quite well now* and *have gained six pounds* since I last saw you. I kid myself into thinking myself happy. I go out more, keep my mind occupied in various ways, go to the theatre with some women friends and am more sociable in every way but I haven't begun to do anything yet. This morning I felt like running away from myself. The relations between my husband and myself are the same as before.

W doesn't seem to like it when I'm feeling better; he makes insinuations, and a few days ago he said I bear watching. That made me laugh and I told him he can think what he likes. As soon as I get away from home I feel wonderful but my mother worries me; she gives me ugly looks and speaks disparagingly of me.—You don't mind my smoking, do you? I'm feeling pretty good now. I love to dance; I notice that I'm dancing as I sit here in the chair. W says that business is improving and he'll buy me an automobile for the spring; that will help me a lot but I'll be careful not to do too much mischief. . . . I was depressed this morning; I was jumpy and wanted to run out, but I cannot put my finger on the trouble. People say that I'm looking much better. I had *only two fits of depression since my last visit* here. W is full of complaints; he says he comes home to four bare walls. I haven't heard a word from M, but I could easily enough get in touch with him but I won't do it; it would be the same thing as before,—besides, I don't look well enough. I'm not doing anything very bad, but sometimes I flirt a little bit. [Laughs.] I've met some people a couple of times,—one of them is a man, but I'm never alone with him;—we just sit in the apartment of one of my woman friends and talk;—sometimes we have luncheon together. This woman is a Bohemian; she is very nice and very good company; her morals don't concern me.—I could carry the affair with this man up to the Supreme Court but I can't fall in love with him—he is baldheaded. He spoke of the possibility of our falling in love, and I said the possibility was attractive and I might take a chance. He is married but I ask no questions. I know I should not do this thing but I enjoy his company and I forget my troubles when I'm with him. The woman who introduced me to him advises me to get new clothes and get fixed

up and grab all the happiness I can get. That's why I'm wearing these gay earrings. You needn't shake your head; I know when to stop.

I never cry any more and do not swear as much as I did. I'm not brave enough to make a change and yet I have a feeling that things will change somehow. I hate Sundays. W is home on Sundays and litters up the house with his newspapers.—I know the honorable thing for me to do is to get out and earn my own living but *I'm not sufficiently self-reliant* and I lack the courage. I'm afraid to risk the little money I have though just now I have a good opportunity to go into the business. W doesn't want me to take a job; he wants me to be dependent on him. I'm much better off now mentally but not economically, and I'm trying hard to adapt myself to my situation. I do my work and then I want to be out and away. The only time I cuss now is when I wrestle with the pots. My appetite is not so very good but I can eat well when I'm downtown with my friends and if we have a little liquor.—My mother is so cruel to me, so irresponsible; she is always near me and always under my feet.—I have no one but you to talk to; *when I'm here I feel fine* but feel bad as soon as I get away. *Something black bothers me*; it's such a cloudy thing that comes over me at times.

Session 17.—[Five weeks after the last session Mrs. B. telephoned that she had determined to leave her husband and go West with her mother because conditions at home were unbearable since her husband had promised her an automobile. The following day she calls and says:] I'm *terribly nervous* and a damn fool. W has been very noisy the last few days. I haven't the car yet but it's coming; but he couldn't compensate me for the abuse he has heaped on me, not even if he bought me a Rolls-Royce. He makes all sorts of insinuations and keeps saying he'll lay down the law now. A few days ago an automobile salesman telephoned and W was so wildly jealous that he insulted me in the presence of company. He roars at me so that I have to lock myself in my room. My mother is so frightened at his behavior that she is very nice to me now. So that *I've made up my mind to go away* with her; she thinks W has gone crazy and is afraid to stay there. W keeps on roaring at me that he wants a regular wife and will lay down the law. He threatened me with changing his will and his insurance policies and to cut me off. I told him to go to hell. Last night he was very meek and to-day I'm feeling better. I was out every day last week trying out cars; we can't agree even on that,—he wants a four cylinder car and I want a six cylinder car. He won't spend more than sixteen hundred dollars for the car. A four cylinder

car is too noisy and bumpy and I won't have it.—I know I'm not treating him right, *I'm not giving him a square deal*. I must dispose of my mother before I do anything else.

I haven't yet got in touch with M and I have dropped the man I met recently,—he became too officious. W has enough reason for being suspicious of me. I hardly ever speak to him and never have a kind word for him. I hate him for being a roaring lion and for humiliating me before the neighbors. I spoke to him of a separation and he said he wished I would sue him. When I said I would go to Connecticut and bring an action for divorce he got mad. I feel now that I could leave him and look for a job. *I'm feeling well* and have gained eleven pounds.—I think I'll take mother west and make arrangements for a fund to take care of her. I made a mess of life and am paying for my mistakes; everything in life is wrong.—I hate to hear the sound of W's key in the lock when he comes home,—it's wicked for me to go on living with him. I don't mind telling you these things any more; you've helped me such a lot that I can tell you anything now.

[Three weeks later I got a letter from Mrs. B in which she said, among other things: "I think you have a hypnotic influence over me and it disturbs me.—My husband is trying to be very good to me and it makes me feel guilty.—*I'm dreaming terrible things*.—I'm taking awful chances; last week I flirted with a man and went to Shanley's with him and stayed out till four A. M. and lied about it when I got home. I love to go dancing with strange men."]

Session 18.—[Four weeks later.] Had a fight with my husband which lasted all night and this morning. He had been noisy and quarrelsome yesterday and ended up by threatening to go away for several days; when he went out he slammed the door. In the afternoon he was calmer but still on the war path. He watches me all the time; he keeps his eyes on me constantly; he times my every movement. He wants to know what I'm doing, to whom I'm writing and even what I think of. I know I'll never leave this man after having put up with him for so many years. After all, a husband is a protection to a woman. ["And an assured meal ticket for a woman who doesn't want to earn her own living."] I could not marry another man and tell him of my past and I'm sure I couldn't possibly keep it from him.—Dancing and music intoxicate and stimulate me. A man in the house who has tried to flirt with me said *I am sex starved*. He spoke better than he knew; I submit to W's advances only when I absolutely must; I can't bear to have him touch me; at times I positively hate him. If he wakes me at night I get ugly. If it weren't that *I'm afraid of*

my conscience I would raise hell. I could easily enough have somebody but my conscience talks back to me. I feel guilty even if I only dance with a man. I met several men lately but they are all very fast; the only way I can get myself to associate with them is by taking a few drinks first. [Smokes and lapses into reverie.] I craved for sex only when I loved M. Last week my husband told me that M is married; it is not true; W said it only to see how I would take it. Now that I'm running an automobile I often think of M; I could meet him and we could take rides together. He did want sexual relations with me; he said he loved me because I was good, and yet he tried to seduce me. But I have always been able to resist men's sexual advances; some have called me a "teaser." All men like me when they are with me. Some day after I've had a good drink I'll get in touch with M if I get devilish.—I hope that some day things will straighten themselves out with me. Business is not very good and my conscience troubles me for running an automobile. I am mercenary but I really think that my work earned the money that W has. Some day I'll do some crazy thing.

Session 19.—[Two days later.] I'm in an awful black mood today. Yesterday forenoon a female beggar with a beautiful voice sang a sentimental song in the court of our building and it spoiled my day,—she made me *feel so worthless!* I cried and threw her fifty cents. I have so much to be satisfied with and yet I'm always discontented. I just want to die. I'm between the devil and the deep sea. Yesterday afternoon I took my husband out in the automobile and tried to be patient and tolerant but I didn't enjoy myself. He is really much better than I am; he loves me and that's why he puts up with me. I don't think another man would put up with me and my mother. He really works very hard and gratifies my every whim. I can't stand it any longer. [Weeps.] When I go out I take a few drinks and so get a little forced happiness; then I look at myself so disapprovingly that I can't believe it's I. [I point out to Mrs. B. the *conflicts* going on in her mind.] My head aches.—I'm afraid that my *heredity* has something to do with what ails me. [I combat this assertion.] I was in a terrible mood this morning; when I get like this I don't let anyone see me. I know I'll kill myself if I keep on like this but I don't want to do it. Even if I met M I wouldn't do anything wrong; but I suffered so much when I broke with him that I resolved then to die rather than to meet him again. He said he would always remember me. He never understood me, he was always puzzled by my sophistication, but I couldn't tell him the truth. He idealized me and didn't want me to smoke, drink or bob my hair. He is a very conservative

Englishman. I would like to know how he is and what he is doing and what he is thinking of. My head is aching terribly.

Last night I felt so guilty and worthless! When I feel that way I'm driven to go out dancing. In a crowd I'm lively and talkative and feel better. When I dance I'd like to go on dancing forever but I won't dance with a short man. My sister-in-law is arranging for little parties at which she'll get me a tall man to dance with.

I don't want to be bad and I do,—I want to have one good fling. Good women housekeepers bore me; I'm comfortable only with risqué people, with their abandon; in their presence I expand and become free and talkative and alive. I have nothing to say to my husband and he has nothing to say to me; so he goes to the movies and I go autoing. The auto spells freedom for me. ["You ought to sell the automobile and go into business."] In business I'm calm and self-possessed. I'm afraid of nothing,—the dark, storms, cyclones, and even mice do not terrify me; *I'm afraid of myself*, at breaking away,—because I did so once.—*I am a dual nature*, no question; in the presence of the good and decent I am good and decent, with the others I'm the very devil. I resent being bossed or managed. I don't flatter myself that I can pull the wool over W's eyes but he keeps them shut. He cried when he found M's letter. He realizes the difference between us and enjoys being in control over me. I wonder are we all dual natures? I think I'm crazy. Don't you think its time I had more sense? I'm more of a fool than I was ten years ago,—there must be a devil in me. I do lots of things just because I like to shock people. Jesus Christ, but I hate house-keeping! And yet I am really a very good cook and a good housekeeper.

Session 20. [Ten days later.]—I'm *feeling fine* but I thought I'd come around and let you see me all dolled up in this nice dress and these lovely blue earrings. I'm going to the races this afternoon,—that's why I dressed up so. There's nothing bothering me now but I was a good deal depressed last week when I had to see a good deal of my family owing to the fact that one of my brothers-in-law was in the hospital for a hernia operation.—I want distraction, I must get away from myself. I can't stay home even five minutes and I must have someone to talk to. *I don't want to think*. W is very irritable and can't get himself to take any interest in anything I like. His own brother told me I deserve a medal for living with him. Another one of his brothers saw me out one night and told me to watch my step and said that's what happens when an older man marries a young woman. His own brothers have no patience with him.

I feel so young and energetic that I can't feel my age even when I try to think of it. I always have a good time when I go out and meet young people but then *I feel bad as soon as I get home*. The result is that I keep constantly making "good" resolutions but am not able to keep them; something within me drives me out. I have no intention to do wrong but I go as far as I can; no one will ever have anything on me. I like sporty people and am going out a lot with a very attractive woman who has a prominent lawyer on the string. When I'm feeling as well as I do now I feel foolish to come here and talk.

[Smokes.] W objects to my smoking in public. He never accuses me of doing anything wrong but says I bear watching. He knows I was a good girl when he met me. The affair with M disillusioned him and shattered his confidence in me; till then he would have staked his life on me. He now lets me go my way and do as I please but he realizes he made a mistake to let me out of the business. I really haven't a thing to do all day. I can't stay home and keep the company of a half-witted woman who won't talk to me.

It's strange how different *you* look at me at different times. When I'm here I like you and am not afraid of you, but when I'm away from here I don't like you and am afraid of you. When I'm having a good time I suddenly think of you and the inconsistency of coming here to be treated and yet doing what I know I shouldn't be doing. Sometimes you look one way, sometimes another; and sometimes your eyes remind me of the man whose eyes I feared so. Sometimes you seem quite tall and at other times short. I'm so much better and am feeling so much better that I wonder why I keep coming here. Some days something compels me to come here; it just seems I must come. It can't be the need for confession, because some days I have nothing to confess. At times I think it's all humbug and that you think I am a d. f. to keep coming here! at other times I think it's wonderful. At times you are so chummy and make one feel so comfortable and at ease that one can speak perfectly freely to you. I don't recall my dreams well but I'm sure I dreamt of you a number of times.

I'm sure I'll never do wrong, no matter how much I desire it; I couldn't live after it,—it would mean a loss of self-respect. I don't want to do wrong and yet I wish I could. I like to make people think I'm a devil! I do love to drink,—a drink makes me feel good and banishes all my worries.

Session 21.—(A week later)—I am dazed, dizzy, all mixed up;—everything at home is just the same. ["Are you taking any medicine?"] Yes; I have been having a cough for several weeks

and my family doctor has been giving me a medicine for it. ["The dizziness is due to the heroin in your medicine."] I cough so badly that I sometimes have to vomit. The doctor told me to stop smoking.—The atmosphere at home is always funereal; yesterday the gloom was especially thick. As soon as I enter my home I get terribly depressed and blue; *I could get arrested for some of the thoughts I think*; I feel like killing myself,—especially since reading an article on the "psychology of suicide" in a Hearst magazine. To forget myself, my unhappiness, my worries, my unsolved problems, I must hurry out of my house and find company, people to talk to, to drink and dance with. The idea of breaking away from W is getting feebler and feebler; I lack the courage; *I am afraid my mind will give way if I should leave him*. Having a child might help me, but I won't risk it at my age and in my unsettled state of mind.

When I am in jolly company I get many a sexual thrill and have a thoroughly good time. W doesn't go out with me at night, but he insists on my getting home by midnight. The automobile is beginning to pall on me; I use it only as a means of bringing me to sources of pleasure. There is nothing easier than for a woman in a machine to pick up a nice man along Broadway or the Drive and then to go off to some nice place where one can dance and have a few drinks,—that's as far as it goes. Knowing my strength, I am not afraid to take chances; the exhilaration I get out of it is worth the risk,—but sometimes the realization falls short of the anticipation. We have liquors at home, but a drink at home is not the same as a drink in 's.

I am really sorry for W. When I come in at night I hear him sigh, but he says not a word of reproach and I pretend to think he is asleep and don't say a word to him; I crawl into bed and make sure not to get near him. He is thoroughly cowed and says not a word even when he notices the odor of liquor in my breath. But he watches my every move and comments on everything I do. Once he said he wished to God I'd go and I said I would if he gave me a reasonable amount; then he changed his mind.

I no longer coax my mother to do anything, not even to eat or go out with me. She talks a great deal to W,—they would get on well together if I left them. He always dashes my spirits and throws cold water on everything I do. If I am happy he suspects me; if I am depressed he is sure I am thinking of M. I am worried lest some day someone should see me out with a strange man in my automobile. When I am doing these things I never think of W, but when I get home I am sorry. I never do anything worse than dance but even that acquires a bad taste

when I get home. I can't believe it's I who is doing these things, and it's not what I want. I wonder would sex help me. The nearest I came to making the break was when I was in a taxi with the man in Chicago; with M the temptation was not so strong.

The up-keep of the automobile costs us five or six dollars a day, and *I feel awfully guilty* about it; W gets nothing out of it except the satisfaction of having people say that his wife drives an automobile and dresses well. He wants me to dress nicely and be seen in the business section in the auto, but I don't like the idea of being a living advertisement for W. If he gave me \$3,500. a year I'd leave him and not be afraid of my head going funny, but he won't do it. All sorts of men are paying me attentions and wooing me,—they seem to sense my discontent and to know what's going on in my mind,—but I'm not easy prey; I never believe a man when he praises me. When I am with you I feel a restraint which I do not feel with others.

(Three months later Mrs. B. telephoned that she was perfectly well and happy, had not left her husband, was doing nothing to make herself independent of him, still runs the automobile and manages to have a good time with its aid and is carefully watching her step,—two men have been pursuing her with their attentions but she is immune against their wiles because she is afraid. I have seen Mrs. B several times during the past year and can report that she is still in perfect mental health.)

COMMENTS ON THE ABOVE CASE.

The case of Mrs. B presents a number of important points for discussion from a practical as well as from a theoretical viewpoint.

The *diagnosis* was a comparatively easy matter. The symptoms and the subsequent course of events proved that we were not dealing with physical disease or with endocrine toxemia. The psychical nature of the trouble was fairly obvious. Some neurologists would have called her a case of paranoia and would have reported her as "a case of paranoia cured by psycho-analysis." Paranoid symptoms, the text books to the contrary notwithstanding, are almost constant occurrences in hysteria. Because her mental faculties were unimpaired and her conversation was perfectly rational, I decided that notwithstanding her delusions of reference (the thought that people were talking about her and making gestures behind her back) she was not insane. The result of the "treatment" proves I was right.

For scientific reasons we may classify Mrs. B as a case of

"*apprehension hysteria.*" She said she was "always fearful." A chronic state of apprehension is a characteristic of most hysterics, but hysteria may occur without apprehensions, *i.e.*, without a fearful state of anticipation of misfortune (illness, insanity, death, bankruptcy). Mrs. B presented only few somatization symptoms, *i. e.*, no somatic equivalents of fears, thoughts, or wishes. Though she had frequently-recurring thoughts of suicide and insanity, and though she often found herself swearing unawares, we cannot call her a case of obsessions. These obsessional (not obsessive) thoughts and actions (swearing) were not compulsive, *i.e.*, unrelated to what was occupying her conscious mind at the time of their occurrence; they were directly related to the patient's conscious thoughts and to what seemed to her her hopeless situation. All hysterical patients have frequently-recurring ideas of a distressing nature which, for all that, are not obsessions. The hysteric can think of nothing else but his malady, his inefficiency, his helplessness, his sufferings, his undesirableness to his family and his environment; as a result of all this he gives the impression (which he shares) that he is not right in his mind, that he is a paranoiac, that he suffers from obsessions.

Depression was a prominent symptom in Mrs. B's case. This depression was nothing but her unhappiness, her hopelessness of getting out of a situation which was thoroughly hateful to her. There was nothing mysterious or unaccountable in this depression, or, in fact, in any of her symptoms. Her whole neurosis was an expression of her helplessness in the situation in which she found herself. *That is what all the psychoneuroses are: the physical and mental manifestations of a bewildered frame of mind resulting from a painful situation from which there seems to be no escape.* Once the symptoms have begun to manifest themselves, the patient has more to worry about and to contend with; he is puzzled and alarmed; he does not understand them; they incapacitate him; he tries to fight against them, and thus he develops other (secondary) symptoms and he becomes increasingly more and more inefficient and more hopelessly invalided. He is torn between conflicting ideas and impulses; one set of considerations urges him to this course of conduct, another set drives him to another course, and a third set to a third course, and so on. Between them all he becomes desperate, he despairs getting out of the mess. The road before him looks too dark; he is so confused that he can no longer trust his own thoughts; help from without seems impossible. The result is depression, utter incompetence, despair and—in a few instances—suicide.

There is absolutely nothing in Mrs. B's history to warrant interpreting her depression as the manifestation of repressed crim-

inality (e. g., a desire to assassinate her husband or her mother), repressed perverse or inverted desires, or unconscious penance for the past enjoyment of forbidden (wicked) satisfactions.

The frequently recurring *thoughts of suicide* expressed only her feeling that there was no other way of escaping from her unbearable situation. She did not really desire death; she loves life and its pleasures too much. Such suicidal thoughts (they are hardly impulses) occur to all of us, normals and hysterics, when life seems too complicated, when things are not going in accordance with our wishes, when our disappointments seem to be more than we can bear—when nothing seems worth while. There is probably no human being alive, at any rate no sane one, who has not often under similar circumstances longed for death and to whom suicide did not seem the readiest way out. To say of such a person, normal and neurotic, that the thought of suicide is the expression of (or reaction to) repressed desires for another's death is the height of the ridiculous. Of course Mrs. B's situation could not help suggesting that if her husband or her mother died she would be free to flirt with or marry M (her ex-lover) or any other congenial person she might meet; but such a thought, even when it occurs to one, is not necessarily a desire, a wish. Besides, Mrs. B repeatedly assured me that neither such a thought nor such a wish had ever occurred to her, and there is no scientific warrant for my taking it for granted or trying to convince her that I knew better than she what was going on in her mind. As often as the subject came up she said that the only such thought she ever had was a desire for her own death.

Mrs. B's sexual life was anything but desirable. Notwithstanding her antipathy to her husband, she had to submit to his demands about once a week or once a fortnight. After it she was always sore; she ached all over. But this had nothing to do with her hysteria. What she wanted was love, not sex. When she was in love with M and meeting him regularly she was perfectly happy and free from hysterical symptoms though she was then exposed to ungratified sexual excitement for months. M did arouse sexual desires in her and she sometimes dreamt of coitus with him, but notwithstanding it all she remained well. Her neurosis began with the advent of the unpleasantness associated with R (the man "with the hypnotic eyes") and the fear of exposure. Her guilty conscience with regard to her husband and to her lover, the danger of her husband abandoning her and her half-insane mother, his discovery of the love relationship between her and M, her severance of relations with M,—all these, added to her other worries (her brothers, her mother, the hypnotic stare, etc.) precipitated the neurosis which had long been brew-

ing. She had lived an unsatisfactory love life for many years but her situation was tolerable until she met M. and then her real conflicts began. It is true that after meeting M her sexual life was even more unsatisfactory than it had been before but that had nothing to do with her hysteria or her symptoms; *all her symptoms disappeared during and after her analysis, although her sexual life was exactly what it had been before.* The mere indulgence in coitus is not a cure for hysteria, and neither is abstaining from a sexual life a cause for hysteria. The psychic conflicts which bring about a psychoneurosis may influence the sexual life deleteriously as they may the other physiological functions. The sexual disturbance in such cases is a consequence and not the cause of the psychoneurosis. (An unhealthy sexual life may result in a sexual toxemia which often gives rise to symptoms similar to those observed in the psychoneuroses, and these symptoms combined with the ungratified libido often give rise to psychic conflicts which lead to a psychoneurosis.) An unsatisfactory love life (which is not the same as an unsatisfactory sexual life) is probably the most fertile soil for the growth of a psychoneurosis.

Apprehension, almost universally misnamed "anxiety," is the most nearly constant symptom in the psychoneuroses. Now and then cases of conversion hysteria and even compulsion neurosis occur in which a state of fearfulness is not present, and that even in cases in which the sexual life is wholly awry. Mrs. B was in a state of almost constant apprehension; she said at first that she feared becoming insane; later on she said she was afraid of herself, of what she might do. She also feared she might commit suicide. At the beginning of her troubles she feared being discovered and exposed to scandal. That is *what all psychoneurotics are afraid of: what they may be tempted to do and what may befall them.* But usually they are afraid of so many things that it is almost impossible for them to say *what* it is they fear. This has given rise to the erroneous notion that they are afraid (apprehensive) in a general way without being afraid of anything in particular. The idea that apprehension is invariably the expression of or reaction to repressed sexual (normal or perverse) desires is unsupported by facts. Mrs. B like so many other hysterical men and women, got over her apprehensiveness without any change in her sexual life, thus completely disproving any relationship between apprehension ("anxiety") and ungratified sexual desires. The fearfulness of psychoneurotic persons is always justified by their circumstances, and the factors determining it can always be ascertained from a careful study of their conscious or subconscious mental processes and without

any reference to an hypothetical and anthropomorphic Unconscious.

Mrs. B's other symptoms too admitted of ready explanation in terms of conscious psychology and disturbed physiology; in not a single instance did we have to interpret a symptom as a symbolic or disguised fulfilment of one or more repressed (unknown and unknowable) sexual wishes of a wicked, sinful, prohibited or disgusting nature. Mrs. B was not an angel of purity; her life had not been a pattern of virtue; and yet her career had been singularly free from any perverted or inverted desires or experiences. She never repressed her sexual desires but always managed not to yield to them. And notwithstanding this, her symptoms disappeared without having been reduced to symbolic sexual equivalents.

Her *fear of insanity* was—in lay eyes—justified by her family history and by the approaching menopause. With the example of her mother always before her, she could not help thinking that with her befogged and disturbed state of mind she might some day lapse into imbecility. It was not necessary to attempt to persuade her that her fear of insanity was due to an unconscious realization of a conflict between her "good" conscious self and wicked criminal and sexual desires actuating her unconscious self.—Her *loss of weight* was due to an impairment of metabolism as a result of her disturbed emotional state. It would have been ridiculous to attempt to interpret her loss of thirty-five pounds as a symbolic melting away of her husband (or her mother) in her own person or as unconscious punishment of herself for unconsciously wishing her husband's premature demise. And yet if, like a loyal psycho-analyst, I had chosen to put that mystical interpretation on her growing emaciation, it would be impossible to disprove its correctness.—Her *compulsive curses* and vituperative exclamations, even when she was alone in her apartment or in the street, are easy enough to understand. We know whom she was cursing and why. Her resentments were so intense that they translated themselves into speech.—Her belief that she was *being talked about* was based on fact. She was no doubt often talked about by her neighbors because of her striking appearance and because of the striking contrast between her and her husband. And, as a matter of fact, she had positive information that some of her neighbors thought her eccentric and talked about her in their sidewalk conferences. How much her guilty conscience contributed to the idea of being talked about, it would be difficult to say, but that it played a role can hardly be doubted. Fixation of reasonable ideas and apprehensions is an

important element in determining the symptoms in a psychoneurosis.

The *fear to be alone* is a fear of having an opportunity to think. That too is why Mrs. B wants excitement all the time and why she loves games of chance, parties, dances, etc. The fear of company at times is due to a fear of being reminded of her unhappiness and her conflicts; she is afraid—as so many neurotics are—that the spectator may interpret what is going on in her mind. The necessity of acting and playing a rôle often makes the thought of company almost unbearable. (The Freudian assumption would be that the neurotic fears to be alone so as not to be tempted to masturbate, and he fears to be in company lest she should find a seducer.)

The *feeling of inferiority* harbored by Mrs. B was fully justified by her estimation of her motives and conduct with respect to her husband and her lover, as well as by her knowledge of her selfishness, her want of principles, her weaknesses, etc. It would have been the acme of inanity to attribute her feeling of inferiority to infantile masturbation. She had reason enough in her adult experiences for always criticising and accusing herself.

Her *sadistic fantasies* (cf. p. 379) are intelligible enough if we consider the noisy and brutal character of her loud-mouthed husband and her failure to do anything to change her situation. (What good would it have done to tell her or attempt to persuade her that a sadistic fantasy is the imaginary gratification of a perverse sexual desire? Incidentally it may be pointed out that during her entire analysis Mrs. B. did not speak two dozen sentences about her sexual life and that at no time did she go into details about it. There was no occasion for sexualizing her symptoms or for raking up the details of her infantile or adolescent sexual life.)

It is noteworthy that in this analysis which lasted twenty hours, we spent no time on dream analysis, although Mrs. B. did tell me one or two dreams in response to my inquiries. She offered no associations to her dreams and, as I was bent on refraining from making any suggestions, I asked no suggestive questions and made no suggestive comments. The analysis of dreams may contribute to the understanding of a neurosis by virtue of its ability to bring up matters for discussion which might not otherwise occur to the patient. Words chosen at random may have the same value. The idea that dreams are the disguised fulfilment of repressed wishes and therefore the royal road to the Unconscious and of the first importance in the

treatment of the psychoneuroses has no scientific warrant whatsoever.

Three or four of Mrs. B's symptoms are not so easily explainable as those I have dealt with above. She said she felt as if she were walled in on all sides, that she awoke with a cloudy feeling in the morning, that she had a pain in the temple at a spot corresponding to the point of entrance of the bullet with which her brother shot himself, and that she was sore in every part of her body where her husband touched her. All these symptoms are what I have termed "*somatizations*," *i.e.*, somatic (bodily) manifestations of mental processes. A person thinks he is in an unescapable situation and gets a feeling as if he were walled in on all sides,—this may be called a sensory somatization. It has nothing to do with the Unconscious, it is not the product of repression, it is not a masked wish-fulfillment; it is only a manifestation of the projecting tendency of the mind, *i.e.*, the mind's tendency to exteriorize our thoughts. (Freudians would in all probability explain Mrs. B's symptoms as an unconscious wish to return into her mother's womb, the realm of undisturbed peace and contentment.)—The pain in the temple is a somatization of the idea of suicide which to her means death by a bullet wound in the temple. This was a fear or a thought but not a wish.—The cloudy feeling in the morning is the expression of the confusion resulting from the inrush of the many conflicting ideas that constitute her conscious self.—The soreness all over is the expression of her resentment of her husband's contact with her body. "To be sore" about something is a colloquial English idiom for "to resent." Mrs. B gave this colloquialism somatic expression; she converted a metaphor into a somatic reality. (For further comments on somatization* the reader is referred to my study of "a case of hysteria with

*I may mention two striking "somatizations"—both of a sensory nature—from my practice. A young woman, homosexual, longing for a heterosexual life, and suffering from a large number of obsessive ideas, complains of very distressing headaches which she localizes as just above the level of her eyes. In explanation of these headaches she says that they always come on after sexual dreams and fantasies, and that she once read somewhere that a person who thinks of sexual matters "thinks on a low level". She conceives the mind as being made up of successive horizontal layers each of which has its own peculiar thoughts; the lowest level—*i. e.*, the level of sexual thoughts—is just above the level of her eyes, where she locates the headaches.—The same patient recently developed another somatization. She had had coitus (condomatus) about three and a half months ago and has been menstruating regularly since. A few days ago she heard a young married woman say that she was in the fourth month and was beginning to feel life. The minute she heard her friend say this she felt a "fluttering" in the right iliac region.

facial paresthesia" in *Psyche and Eros*, vol. 2, no. 4, p. 239.).

In connection with what we know about Mrs. B's *dream life* (p. 522) it is important to note that she had no nightmares or apprehension (anxiety) dreams until the end of her analysis (when her conscience troubled her a great deal). Such dreams, then, are not necessarily concomitant with even a severe and distressing psychoneurosis. Psychic conflicts, ungratified sexual desires and an extremely unhappy life do not conduce to distressing dreams. The Freudian ideas that the dream life is intimately related to the neurosis and that the repression of sexual desires bring about apprehension dreams are not borne out by facts. Mrs. B's dream of levitation (p. 521) is easily enough explained if we bear in mind her passion for dancing. As soon as she began to feel better she used to "dance" in her chair. (The Freudian would explain this *passion for dancing* as a manifestation of muscular eroticism and a kind of onanism; to me it is a manifestation of an almost instinctive and universal *craving for rhythm* as well as being suggestive of having a good time [bright lights, music, fine clothes, nice company, etc.].) Her dream of being a medium (p. 390) I did not attempt to interpret because she spoke of it at the close of the session and did not again refer to it. Psychoanalysis is a practical matter and it would be an unjustifiable waste of the patient's time and money to discuss his dreams unnecessarily.

A popular and ancient idea about psychoneurotics is that they are somehow malingerers, impostors; that their symptoms are imaginary, not real; that they could be well if they wanted to be so; that they are selfish, heartless and cruel exploiters of those who are devoted to them. The Freudians and other psychoanalysts practically maintain and promulgate the same notions; to them the psychoneurosis is a wish-fulfilment and the symptoms are the disguised fulfilment of repressed reprehensible desires. Thus the neurotic is painted as a wickedly selfish, lazy, hypocritical, ungrateful, heartless, domineering, inconsiderate, brutal, criminal, lecherous, incestuous, perverted and inverted monster. The idea underlying treatment by psycho-analysis is that if the patient can be persuaded that he is such a monster he (or rather, she) will give up her symptoms and get well by virtue of transference, *i. e.*, because of her love for the analyst. The matter is, of course, never worded so bluntly. Technically the matter may be expressed somewhat as follows: transference overcomes the patient's resistances to such an extent that her unconscious impulses and memories become conscious and that automatically kills the unconscious desires,—the patient can no longer deceive herself as to her real motives.

My experience has taught me that there is no truth in the psycho-analytic theories, that the psychoneuroses are not wish-fulfilments, that there are no unknowable reprehensible unconscious mental processes, and that, therefore, the Unconscious does not need to be invoked in the treatment of the victim of a psychoneurosis. To me too the neurotic is not a hero. I am not attempting to whitewash the neurotic, nor to glorify him; but I am convinced that he is just as much sinned against as sinning and that he is entitled to have justice done him and to be understood. We are all a mixture of good and bad, of weakness and strength; under favorable conditions the neurotic would be as normal as we, and under unfavorable conditions any of us may become neurotic. Heredity, education and environment acting upon a sentient human being determine the occurrence or non-occurrence of a psychoneurosis just as inevitably as infection with the plasmodium determines the occurrence of malaria.

How does psychoanalysis (*i.e.*, mental analysis which does not depend on the assumption of "unconscious" mental processes) cure or help to cure a psychoneurotic patient? The answer is simple: the patient is made to face his situation, to study it from all angles, properly to estimate the numerous factors that contributed to bring about the neurosis, to understand the mode of production of the different symptoms (somatizations, fixations, regressions, etc.) and to recognize his share of responsibility. At the same time the patient is encouraged to resume his duties, to accept his fate philosophically, to do all he can to make his burdens lighter and to make his situation more bearable or to change it in accordance with his desires. This invariably improves the patient's mental and emotional state and not infrequently results in a cure.

HAND KISSING AND HAND FETICHISM.

By Dr. Kurt Sonnenfeld.

A young man kisses a young woman's hand.

This tender flower of courtesy and affection has its roots 'way back in the early history of mankind and in the abysses of the sexual life. Affection and courtesy, caresses and admiration, these are the elements entering into a hand-kiss, a kiss which is the most charming and happiest emanation of that sober pleasure in self-humiliation which, under the name of "masochism," constitutes one of the most mysterious chapters in the psychopathia sexualis.

The hand-kiss, as we encounter it all about us in the street and in the salon, is, in reality, a socially approved form of coitus.

If we are rude enough to watch a loving couple bidding each other farewell on a spring night, we shall have the opportunity to learn that the apparently trivial hand-kiss embraces the most hidden intimacies.

Here a young man is bending over his sweetheart's hand—very slowly, resembling the manner in which one consumes a choice morsel. His lips will soon touch that fragrant skin and nestle against those hot fingers.

There one is removing his beloved's glove and covering the gently resisting hand with passionate kisses from the wrist to the finger-tips.

Another is kissing his companion's gloved hand but is covertly seeking for the little spot on the inner side of the hand which is not covered by the glove.

And now let us look at the young women whose hands are being kissed. One timidly tries to withdraw her hand, as if at the last moment she wished to forego the impending pleasure; another roguishly and in self-surrender presses her hand against the man's lips; a third coquettishly rolls her glove down a bit so as to receive the gallant's respectful hand-kiss.

Obviously, in innumerable cases the hand-kiss wholly lacks this sexual coloration and amounts to nothing but a harmless, innocent, and conventional form of salutation. But the colorless kiss of politeness with which one greets a rich aunt or the wife of one's employer does not prove the absence of electric, thrilling pleasure in those hand-kisses about which connoisseurs in the art of love rave.

That such kisses are indeed sublimations of "the deed of kind" is apparent in the tense and nervous facial expression of the voyeur, that wordrous ascetic who gratifies his love hunger by watching the caresses of others. People of this kind can stand

on a street corner for an hour, even when they are in a hurry, and watch a loving couple postponing the minute of parting by indulging in new and varied caresses,—and if they witness the final hand-kiss they feel themselves rewarded for their patience.

The young woman's facial expression while her hand is being kissed often betrays unmistakably what is really behind the caress. Have you never seen that faint sign of proud cruelty about a girl's mouth when she politely submits to the man's reverent courtesy?

In some persons in whom hand-fetichism (a subject which we shall discuss more at length) has assumed certain striking forms, the hand has acquired the functions of a sexual organ; nervous outbreaks of perspiration are comparable to seminal emissions.

Is there a single set of picture postcards which does not include all varieties of hand-kissing? There are numberless erotic motives—but, for all that, these pictures make use of the hand-kiss at least as often as the moon and lilacs in connection with doggerel poetry. Is there a single suggestive or shamelessly erotic romance that is not full of hand-kissing? It would be a worth while statistical study in sexual pathology to calculate how often in such a romance the women's hands are kissed and the glowing phrases in which these kisses are described.

To understand the development of the hand-kiss one must study the kiss as a whole.

In healthy persons the sensual element is localized, *i. e.*, it manifests itself only in a relatively small portion of the body. In a kiss the pleasure of touching and the excitation of the nerves of taste and smell are fused into one inseparable entity. The lips are sexually excitable and—an evidence of degeneration—their irritability grows with increasing civilization, exactly in consonance with the decentralization of the sexual life of neurotics. That the sense of smell discharges an important function in kissing is apparent from the custom of the Chinese who kiss each other with the nose, not with the mouth.

These comments give us a hint of the role the kiss plays in the love life.

Now we can turn our attention to our special subject: what is the role of the hand-kiss in the erotic realm and how did it acquire this significance?

One who is acquainted with the method of biological science will not be surprised that in answering these questions the psychoanalysts revert back to man's quadrupedal past. Man's four-footed ancestor, owing to the position of his head, could not help inhaling constantly—even during the period of "heat"—the emanations from his forepaws, and this odor (which was originally only an accidental accompaniment of his sexual excite-

ment) finally, in accordance with the familiar law of the sexual life, became an essential constituent thereof. Let this be noted: the odor of his own forepaws. This may be the origin of that auto-erotic narcissistic phenomenon that we encounter in insane asylums: the lunatic is in love with himself, with his own image, and covers his own hands and arms with ardent kisses. At any rate, auto-erotic phenomena, even if only in weakened form, are much more common than is generally believed.

How our four-footed ancestors developed a preference for the forepaws of the opposite sex may be observed even today in the behavior of the tomcat who gallantly sniffs at the paws of the female of the species.

But this hypothesis aims no further than explaining the hand-kiss as a subordinate constituent of the sexual-complex as a whole. It does not explain the abnormal cases in which the hand-kiss represses and replaces all other love's delights, thus barring the man's pathway to the woman. *Hand-fetichism* is relatively harmless inasmuch as it is a passion which can be easily and unnoticeably gratified. It is an almost uncanny fact that the fetichism of this uniform and genuinely innocent form of sexual pleasure never gets satisfied and yet steadily gets more and more bound up in his passion. Persons of this kind are content with experiencing very tiny bits of reality which in their fantasies they elaborate into orgies.

By a kind of "emotional-transference" gloves become a fetich for such persons and we know of enthusiastic collectors in this sphere. We may, in this connection, recollect Alfred Berger's "Hofrat Eysenhardt" who, in his early boyhood, bought ladies' Swedish gloves for his petty allowances and covered them with his kisses until his father sought to wean him from his trait with his riding-whip. It need hardly be said that such collectors greedily possess themselves of pictures and post-cards depicting the hand-kiss.

Fetichism is either congenital or acquired. According to our latest theories it is acquired because of some childhood sensual experience which made a strong impression on the childish soul and which is reproduced in memory with every recurrence of sensual excitation until this experience finally acquires a sexual, a fetichistic, valuation.

It is not altogether safe, therefore, to train children to kiss the hand and to judge of a little lad's manners by the celerity with which he snatches at his auntie's hand.

To the normal human being the whole body of the opposite sex is a kind of fetich. Notwithstanding this, almost every individual has his own peculiar fetich which enriches his love-life

and endows it with individual characteristics. Hand-fetichism is not very rare.

HOW MUST A HAND LOOK TO BECOME A FETICH?

Obviously there is no one type of hand that is solely calculated to bring some individual bliss. A hand may be wonderful because of its artistic curves, the expressiveness of its joints, the palm or the fingers, or by the deftness of its movements, its skill as a tool, etc. Only what is purposive is beautiful. Therefore, that hand is most likely to find favor which makes the finest prehensile organ, *i. e.*, a well-shaped, flexible, powerful hand. A very tiny hand, such as the poets compare with the petals of flowers, begets an unhappy impression of its being crippled. The most beautiful of all hands is the one free from the wholly superfluous ornamentation with rings and bracelets which to a more refined taste have as little appeal as a ring in the nose would have.

HOW HAS THE HAND-KISS ACQUIRED THE SIGNIFICANCE OF ADMIRATION?

Evidently because in giving the hand-kiss one has to bend down and because the depth of the bow symbolizes the degree of respect. In the Vatican it is the custom for members of royal families to kiss the Pope's hand, for Cardinals and Bishops to kiss his knee, and for all others, priests and laity, to kiss the cross on his slipper.

WHY DO MEN KISS WOMEN'S AND GIRLS' HANDS?

That gallantry had a masochistic origin is unmistakable. To be convinced of this one need only read in Emil Lucka's "The Three Stages of Love" the chapter on the worship of women in the Middle Ages. Some men experience masochistic pleasure from walking at a girl's left side, from carrying her jacket, picking up her purse from the floor, or giving her the right of way.

But sadistic and masochistic impulses—which exist to a greater or lesser degree in all of us and are usually repressed into the Unconscious—are usually closely interwoven, and we therefore find that persons who love to kiss another's hand also love to have their own hands kissed. We might call this a combination of active and passive fetichism.

The roles played by the hand-kiss are often interchanged. In the Orient the woman kisses the man's hand, in Mortenegro a mother kisses her son's hands. In the hot-blooded south the hand-kiss is more common than in the cold north. In Vienna the hand-kiss is observable everywhere; in Berlin, on the contrary,

it attracts attention. The south-German greeting, "I kiss your hand," betrays a deep-rooted tendency, a habit.

The hue and cry of physicians that the hand-kiss is unhygienic—for even the cleanest, most delicate, and most sweet-smelling hand is covered with thousands of germs—is an objection which will deter no man from kissing his lady-friend's hand before he has stopped to disinfect it!

(Translated by S. A. Tannenbaum, from "EROS," No. 5, 1921.).

APPREHENSION AND DISGUST.

By Dr. J. Marcinowski, *Bad Heilbrunn, Ob. Bayern.*

Among the misunderstandings which the psycho-analyst is called upon to dispose of day after day is that of the true nature of apprehension ("Angst") and disgust. Both of these are sensations which a naive person casually associates with occurrences in his environment. He believes this or that has caused him apprehension, he was disgusted with this or that; whereas all one is justified in saying is that this or that circumstance has *awakened* in us apprehension or disgust. The occurrences in the environment are not the excitants nor even the objects of apprehension or disgust; they are only the factors which set free a psychic mechanism having a distinct and final nature in the individual's psyche. I shall attempt again to establish these propositions inasmuch as I believe that it cannot be too frequently repeated that this conception is the only psychologically correct one and the only one that has any therapeutic value.

The psychology of the past has attempted in vain by rationalistic considerations to characterize apprehension and disgust as absurd phenomena; these sensations were, accordingly, treated in the manner in which one attempts to talk a paranoiac out of his delusions,—as if one could call anything so absurd a method of therapy! Of course they knew no better, but today we know that, strictly speaking, there is nothing absurd and that what we formerly characterized as absurd (and what the layman finds *non-sensical* even today) is only something that is not understood, *i. e.*, something that has another sense. How then shall we think of apprehension and disgust? I have already said that we must regard it, first of all, from the viewpoint of the ultimate,—the only allowable viewpoint in psychology. We do not have to ask whence comes this feeling, but what does it tend to, for the attainment of what purpose does apprehension or disgust develop in us? Thus questioned, the phenomenon at once replies: It is a matter of the organism's *protective measures calculated to*

maintain the soul's equilibrium. Apprehension and disgust are quite apparent defensive measures, thus regarded. But even as I am writing these words, the reader is probably still of the opinion that such defence appertains only to processes that confront me in the outer world and I guard myself only against unpleasurable impressions. But this is not true.

In elucidation of this let us study a few simple examples of apprehension and disgust. One of my female patients had, at the command of a tyrannical and brutal father, entered into an engagement of marriage contrary to her own instinct and desire. The man, as it seemed, wanted to win the girl for his pleasure by arousing in her sensual cravings. Up to this time she had successfully fought off all such advances; but one day, as he was bidding her good-night, he succeeded in drawing her close to him in a dark hall and covering her with passionate kisses. At first her fright robbed her of her senses for a while; then she was seized with a nameless apprehension, and with wild disgust she freed herself from his embrace and at once broke the engagement.

I have chosen this example purposely because the whole thing seems fairly obvious even to the simplest intelligence. A healthy repugnance (counterwill) guards itself against an assault,—there is nothing to explain. And yet psycho-analysis yields us something quite different. If she had felt only anger and had then and there given her offensive lover a slap in the face, I too would gladly be satisfied with the simple explanation of her reaction. But that was not the case; on the contrary, there was first a fright which caused a momentary paralysis, then apprehension and finally disgust. And the whole thing was followed by a sense of shame, not by anger.

We must always be on the alert when an emotion is manifested which, when regarded superficially, seems to be illogical. Why was the girl ashamed if she was free from guilt? The other person was the guilty one and there was nothing for her to reproach herself with. Many would not even think her guilty of a wrong in having entered into an instinctively repugnant engagement and would excuse her on the ground of having obeyed her father. But we bear this fundamental rule in mind: the patient is always right, *i. e.*, if he manifests a definite emotion it must in some way be right and fully justified and, therefore, meaningful, even though on first view it seems absurd. I would maintain this proposition: there is no such thing as an illogical emotion; at the most there is only an illogical criticism of the patient, but the error is the observer's who cannot see deep enough, but not in the patient who produced the apparently false emotion.

If therefore, our patient was ashamed, she had a right to be so, and we shall follow the analysis without difficulty as it gradually made it clear that the man's attempts to arouse sensual ideas in the girl had not been wholly fruitless and had succeeded in stimulating the girl's fantasy in lonely hours. All this had prepared her for a discharge of erotic pleasure,—and this discharged itself at the moment when the man overwhelmed her in the dark. That is why she got a fright which paralyzed her momentarily, or, to speak more clearly, there was a brief period of receptivity, a [conscious?] disposition to welcome the man's ardent advance. And now it will not be difficult to admit that apprehension is not to be confused with fear of the brutal man—fear and apprehension are never identical—but that apprehension streamed forth at the coming of this inner pre-disposition to acceptance, *i. e.*, because of her own wild stirrings and the wishes in the depths of her soul. And thus her apprehension served to protect her from something which would have been unbearable to her consciousness, and the mechanism of repression graciously concealed the clear recognition of the event, for the purpose of maintaining the imperilled psychic equilibrium, but not without the emergence of a feeling of shame to show that the Psyche knew quite well what had been repressed. [The Psyche knew, but she did not!—S. A. T.]

Before we proceed I shall add a few words about the *distinction between fear and apprehension*. Fear is always logically founded; I am afraid of something definite, something real. I must maintain this even there where I do not apprehend something definite, *i. e.*, where I am confronted with something indefinite. I am, therefore, afraid of something; fear can be corrected by logic, may be exaggerated, etc., but apprehension is something wholly different: there is something uncanny about apprehension; I am not apprehensive about something; apprehension is the feeling which accompanies something in my mind, something which is always somehow related to guilt. The more carefully we study these things the more must we doubt whether there is any other apprehension than guilt-apprehension. In a previous essay ("The Erotic Element in the Sense of Guilt," in number five of this journal) I have set forth my views on the feeling of guilt. The feeling of shame (*ut supra*) was clearly in requital for the guilty nature of the preceding sudden outburst of the pleasurable sensation of which I spoke. I may be afraid of a person; apprehension overwhelms me in the presence of guilty impulses. I may be afraid of being apprehensive, just as I may be afraid to go into the street because I fear the fear of the street and all the torture that goes with that. But it is

absurd to speak of a "phobophobia" and to translate that as an "apprehension of apprehension." I may have a fear of apprehension, be in awe of apprehension, but cannot have a phobophobia.*

But let us return to our example. Superficial observation would say the man disgusted her, he is disgusting to her, she finds him disgusting. Though this sounds correct and though it is true that, literally speaking, she has a repugnance for (counterwill to) him, yet it would be incorrect to translate "disgust" by "counterwill." Her psyche was divided between two desires which were antagonistic to each other; for, apart from her genuine counterwill to her unwished fiancé there was living within her a faint pleasurable predisposition to the sensual excitations with which he wooed her. The disgust applied to this desire. It is ever the same: apprehension is apprehension about oneself, about looking into the depths of one's own soul, and *disgust too is always disgust with oneself*.

How wonderfully does the vomiting of conversion hysteria depict this in making the individual eject from his own depth the inner dirtiness! But it was not the other person who soiled us, that is beyond him, for if we are clean nothing will attach itself to us and certainly not penetrate into us. It is always our own dirtiness that makes us spit out and which disgusts us; our own dirtiness which is characterized by an inner predisposition, by an inclination, to approve of the ugly, be the desire ever so slight.

Careful observation will establish the same state of facts in every case. A child, *e. g.*, beheld the exposed genitals of a tramp; frightened and apprehensive [why not afraid?—T.] it ran away. But the seed has been planted in its fantasy and ever afterwards it must occupy itself with the ostensibly repugnant experience. How remarkable that it "must" do that; under other circumstances we are in the habit of guarding against unpleasant impressions, of quickly repressing from our memories the recol-

*But Dr. Marcinowski's distinction is merely an arbitrary differentiation between *words*. Psycho-physiologically the emotion—whether we call it fear or apprehension or dread—is the same. We may, if we so desire, agree to call a certain emotion by one name if it occurs under certain circumstances, and by another name if it occurs under other circumstances. This is as true of *fear* and *apprehension* as it is of *jealousy* and *envy*. It would have been, I think, much more to the point if Dr. Marcinowski had cautioned his readers not to confound "fear" or "apprehension" with "anxiety." German and English writers have got into the habit of translating "Angst" by "anxiety", notwithstanding that "anxiety" is a painful state of mind with reference to some *future* event and always suggestive of a *hopeful* possibility.—S. A. T.

lection of what annoys us,—why do we act the opposite way now, and why is it associated with shame and disgust, and why are we shocked at and indignant with the environment when one little question would expose our insincerity and hypocrisy?

I recall in this connection a child who on the occasion of a similar occurrence professed to be shocked at the snickering, laughter and whisperings of the other girls. I remarked thereto that I thought the others were more honest in the matter than she had been. The reply I got was an outburst of indignation. Thereupon I asked her: "And when you lay in your little bed that night what were you thinking of?" Her reply was a violent blush and guilty silence.*

We may therefore adhere to this—for all the examples that I might cite would pursue the same course—apprehension and disgust always pertain to one's psychic depths and never to the occurrence in our environment which initiated it. It is always final viewpoints of the protective defence against the wrong, and this wrong is always a part of our desires and longings which run counter to the rest of our being and thus begets an inner conflict. That is why a really unclean ("unsauberer") person never can feel either apprehension or disgust in such situations. A proper understanding of these things we can get only from the viewpoint of the ultimate, the only one allowable in psychology. One cannot be cured of such conditions before he have stood before his own most secret desires and cravings and willingly come to an understanding with them, *i. e.*, consciously and honestly decide what to do about them.

Let me add a little postscript to the first example. Subsequent to the aforesaid occurrence in the dark corridor she developed an ever-recurring compulsive idea that her face was distorted; this came since the fright which she experienced at the realization of her fiancé's savageness, and at the same time she had the feeling that this distorted face had come on her as a punishment. In this case too we have an absurd feeling which her kindred explained with corresponding unintelligence. She also used to run to the mirror repeatedly to look at herself and she shunned company because she was always thinking what others thought of her distorted face. Needless to say, the compulsive idea was associated with a lively sense of apprehension. Our analysis proved that here too the feeling of being punished was

*Would it not have been more significant and more to the point to have inquired *what* and *how* she thought of the incident? Being human and unaccustomed to such an experience, she *must* have thought of it for a long time after; if she had not we would have to think her abnormal.—S.A.T.

fully justified, but that, of course, she herself had inflicted this punishment, and that the condition was a product of her own fantasy.

The mechanism was as follows: Her restrained desire forced its way unsatisfied to the surface, naturally was answered there with apprehension, exactly as at its first beginning; apprehension, which, as I have said, is guilt-apprehension, and guilt demands expiation. And inasmuch as the desire was not dead the need for expiation was a permanent need which accompanied the tension of repressed desire. And thus the symptom manifests in a typical manner both desires: the repressed craving as well as the repressing moral forces,—the well-known “compromise formation,” as Freud has designated it. She thought she saw in the mirror and in the distortion of her face both fright and dismay and a subtle touch of sensuality. No wonder that she withdrew from society,—a neurotic always likes to think of himself as transparent and is also ashamed of his symptoms, and this too with right inasmuch as these are nothing but the embodiments of desires in the soul’s depths which merit shame. Naturally when the patient looks on his symptoms he has no recollection of the repressed desire which must be kept away as being incapable of consciousness. That this example also had an infantile determinant I need hardly mention; the aforementioned relationship to her father furnished us with another avenue to the analysis.

Translated by S. A. T.

COMMENTS ON “APPREHENSION AND DISGUST.”

By S. A. T.

Fear is defined by the New English Dictionary as *the emotion of pain or uneasiness caused by the sense of impending danger, or by the prospect of some possible evil*. Etymologically the word is connected with Old English *fáer* (which meant “sudden calamity, danger”) and corresponded to Old Saxon *fâr* (which meant “ambush”) and Old High German *fara* (which meant “ambush, stratagem, danger”). The etymology of the word clearly implies that originally the danger was always thought of as something from without, but now the word is applied to anything, e. g., internal processes (disease) and impulses, which may endanger the person’s health, comfort or peace of mind.

In common speech a number of words are used as synonyms for *fear*, e. g., apprehension, anxiety, dread, etc., but strictly speaking, none of these is synonymous with *fear*. “Apprehension” means only *the idea or anticipation of danger* and does not imply the

emotion of fear; it relates to something in the future. Fear is excited by a threatening evil or impending pain. *Dread* expresses the highest degree of fear. *Anxiety* I have defined in a footnote to Dr. Marcinowski's essay. The distinctions Dr. Marcinowski and the other Freudians try to make do not exist; those distinctions are made with the distinct purpose to befuddle the neurotic patient. The psycho-analytic technique and philosophy require the patient to be persuaded that what he felt was not fear (*i. e.*, was not due to the dangerous situation in which he found himself) but apprehension ("anxiety") and that apprehension is the outward manifestation of or reaction to repressed desire. This is done on the principle that the neurotic patient must always be put in the wrong, he must always carry the blame for his emotions and symptoms, he must be presented to himself as a vile and contemptible creature of evil passions. Then as a sop to his ego he is told that he is really not such a bad fellow, that if he were really "bad" he would not be sick, that his symptoms are a compromise between his warring better self and his evil desires.

Thus Dr. Marcinowski wholly ignores the fact that a woman assaulted by an unscrupulous and sensual man utterly repugnant to her would instinctively react with fear to the instant realization of the danger of being raped. What kind of woman would not so react? It is doing violence to psychology and to common sense to ignore the actual cause of fear and to attempt thence to convict the innocent victim of such an assault of having harbored sinful passions. These remarks apply equally, of course, to the case of the young girl who was the unwilling witness of a tramp's act of exhibitionism. Being human, the child could not help thinking of what must have seemed to her an extraordinary occurrence. That she blushed and was silent in reply to Dr. Marcinowski's question does not prove her guilty of what he accused her. (He did not ask her why she blushed and was silent.)

Dr. Stekel's formula that "all apprehension ('Angst') is apprehension ('Angst') of oneself" is an absurdity. All fear is fear of something dangerous or unpleasant that is about to or may happen to oneself or to another or others. A person may be afraid of himself, *i. e.*, afraid of what he may be tempted to do under certain circumstances; he may feel that he is in danger of yielding to a temptation. In these cases the danger comes from within, though the object of the temptation is without or is an action (*e. g.*, onanism) condemned by the environment. But the emotion is always fear. Absolutely nothing is gained by giving these temptation-fears a different name unless the

new term is carefully distinguished from those in current use,—and this is something which psycho-analysts never do. (They depend on equivocations for their effects.)

To define "apprehension" as a "fear of oneself" or, as Freud does, "a fear of one's libido," and then to say that "all apprehension" is apprehension concerning oneself or apprehension concerning one's libido is as ridiculous as it is untrue. All sorts of circumstances may justly give rise to apprehensions about our own or others' safety and comfort. What the psycho-analyst relies on in his technique is the common confusion of "fear" and "apprehension" ("Furcht" and "Angst"). The formula that "all apprehension is apprehension of oneself" has no therapeutic value unless the patient mistakes "apprehension" for "fear;" the moment he does that he must proceed to find repressed desires within himself or let the analyst attribute them to him.

Fear, says Dr. Marcinowski, can be corrected by logic, whereas apprehension cannot. This is certainly not true. A fireman in a burning building is afraid when he hears a sound which means that a wall is cracking; a woman wakes at night and finds a burglar in her room and is afraid. What is there about these fears that can be corrected by logic? Apprehension, says Dr. Marcinowski, is always due to a fear of inner guilt. The wife of a detective is apprehensive of danger to her husband who has been assigned to run down a gang of counterfeiters. What has her apprehension to do with inner guiltiness? What is there "uncanny" about such apprehension?

Dr. Marcinowski's statement that *all* disgust is a disgust with oneself does as much violence to truth as the psycho-analytic definition of apprehension does. *Disgust* is "a strong aversion or repugnance for anything offensive to the senses, mind or morals" and arises under a great variety of circumstances in which the individual feeling the disgust is in no way at fault. The cause for disgust is almost always outside of us, but, of course, one may occasionally be disgusted with oneself. Dr. Marcinowski's patient may very well have been disgusted merely with the man's beastly display of passion, but she may also have been disgusted with herself for having been sensually aroused under such circumstances. But all this is simple common sense, has nothing to do with any unconscious (unknowable) mental processes, and does not warrant Dr. Marcinowski's generalization. A person with even only slight sensibilities may be disgusted on suddenly being confronted with a rotten and wormy carcass; there is enough in such a sight to make some persons sick almost to the point of vomiting. And yet Dr. Marcinowski says that all disgust

is with oneself and is the result of one's sense of one's own inner dirtiness (*i. e.*, moral dirtiness)! And this is the only psychology that has any therapeutic value!

WILD DREAM ANALYSIS.

By S. A. TANNENBAUM, M. D.

In his recently published *Studies in Psychoanalysis* (N. Y., 1922), Professor Baudouin devotes Chapter VIII to showing that "dreams may be the expression of other wishes than those relating to the sexual instinct," a theory which, he says, has the endorsement of Professor Freud. He thinks it not impossible that "*all* the instincts would find expression in dreams." To establish his thesis he analyses three cases in which the dreams were "aroused" by "the instinct for motherhood." Though this instinct, he says, is "not normally 'censored' like the sexual instinct," it "may be more or less repressed, and impressions relating to it may be repressed under the influence of a moral sentiment. *Such dreams assume symbolical forms though 'the repression has not been vigorous.'*"

One of the dreams he analyses (pp. 284-286) in illustration of the above ideas emanates from one of his patients, Renée, a pregnant woman who has repressed her unwillingness to be a mother. Renée, he tells us, was a neurotic; she has suffered long from nervous and sexual troubles, she was frigid and was subject to obsessions; she thought herself very ugly and believed she had a goitre; she frequently suffered from nervous pains, attacks of nervous irritation, a sense of suffocation, etc. Though she loves her husband, she has only once known a "normal" coitus with him; on all other occasions she has had to find "complete gratification" in onanism.

Renée's "dominant [conscious] idea was that she would give anything not to have a baby. She rationalized her repugnance by reasons which, though plausible, were inadequate to explain the intensity of her dislike to [*sic*] the prospect. It was not necessary to dig deeply beneath these reasons before discovering an irrational and quasi-instinctive [?] but intense disgust for motherhood."

"Here is one of her dreams:

The face of a drowned woman showing above the water, in twilight. Renée stretched out her hand to pull the body out of the water, but the body disappears.

The associations to the words "drowned woman" have an unmistakable significance: a swollen body, a fat woman; *her breasts quake* [sic] . . . *This woman laughs; she is repulsive. Beside her is a young girl, slender and fresh-looking.* 'I've always thought pregnancy disgusting.'

"This drowned woman is Renée pregnant. She is 'drowned' because she feels overwhelmed by the claims of motherhood; she cannot meet them; she says that it is beyond her power to do so, because of her ailments, and because she is not well off enough [sic]. But the fundamental thing is her disgust; and when we ask for associations with the 'pulling out of the water,' we once more get images tinged with disgust:

"To pull by the hair.—Lice. Itching. A dirty comb which combs out lice. [A footnote to the last word reads: "Possibly this is an allusion to masturbation."]

"Some writers, and Adler in especial [sic], have pointed out that such a refusal of childbearing may be part of a general refusal of femininity and a 'masculine protest,' a subconscious wish to play a man's part. Renée certainly seems to exemplify this theory, and her repudiation of the coming child would appear to be a particular instance of her general refusal of the woman's part, or of her maladaptation to it."

We are interested in the above analysis only as an illustration of Professor Baudouin's method, his theories and his technique. Those who are acquainted with Freud's theories and technique will at once recognize a strong family likeness, a likeness so strong that it will be impossible to distinguish between them. Baudouin's analyses are as we shall see, as banal, as dogmatic, as unscientific, as illogical and unverifiable as Freud's. (Cf. my comments on Freud's analysis of a dream, in this journal, No. 2, pp. 196-197.)

It must be noted, in the first place, that the above "analysis" tells us absolutely nothing about Renée that Dr. Baudouin has not already told us. That analysis was a waste of time, if it was nothing else; it led nowhere. When the analyst knows a patient's history it is the easiest thing in the world for him to *read into the dream what he wishes to find there*; he has his theory and then he pounces upon some element in the dream and twists that about, distorts it, adds a little here, takes away a little there, and then dictatorially announces to the patient the discovery of the complex which he had pre-determined to fasten on the long-suffering and more or less suggestible neurotic. In the particular instance before us, the patient had to be convicted

of homosexuality, masculine protest, unwillingness to be a woman, and a fixation on her father, her mother and her sister. This had to be done because of the author-analysts's belief in the theories of Freud, Jung and Adler; starting out with the assumption that these writers had "proved" certain propositions about the origin and significance of neurotic symptoms, Professor Baudouin proceeds to discover in his patient's dreams the complexes predicated by the psycho-analysts. That is how all orthodox psycho-analyses are conducted, notwithstanding the absence of anything resembling logical proof of the truth of the psycho-analytic "findings" of the aforesaid analysts. What Professor Baudouin and the growing host of practical psycho-analysts overlook is the fact that *assertions—even the assertions of sincere psycho-theraputists and physicians—are not findings*. A true scientist, one who has the interests of science as well as the interests of his clients at heart, will not operate with such assertions as if they were unquestionable facts. He would realize the many and serious dangers to science and to his client that lurk in such a procedure. *A psycho-analyst can do his patients a great deal of harm and implant in them an even more serious neurosis than that from which they are already suffering if he makes them believe or makes the suggestion to them that they are afflicted with all sorts of tabooed impulses and wicked motives. But the greatest harm that can be done to a human being, especially a sick one, is to try to convince him that his actions are not the products of his conscious mind, that he does not know himself and cannot know himself, that his motives and impulses are the products of things within himself of which he can have no knowledge without the "analysis" of an expert, and that he is "responsible" only for what emanates from his conscious mind.* That these objections of mine are real, not merely hypothetical, I may mention that I have had occasion to treat patients for severe neuroses following the indulgence in perversions which were approved of, and perhaps also discovered, by a world-known psycho-analyst who had "analyzed" them before me. *There is great danger, therefore, in such analyses of dreams (and symptoms) as I am now considering.*

In illustration and justification of some of the above strictures, I refer the reader to the final paragraph in Professor Baudouin's analysis of Renée's first dream (*vide supra*). He says that "some writers have pointed out that *such* a refusal of child-bearing as Renée's *may* be part of a general *refusal of femininity* and a 'masculine protest,' a subconscious wish *to play a man's part*. Renée *certainly* seems to exemplify this theory, and her

repudiation of the coming child would *appear to be* a particular instance of her general refusal of the woman's part, or of her maladaptation to it."

It will be noted that Professor Baudouin speaks of "*such* a refusal of childbearing"—words which imply that there was something peculiar about Renée's unwillingness to become a mother; but he has not told us anything of such a peculiarity or peculiarities. For aught that appears to the contrary, Renée's unwillingness to assume the responsibilities of motherhood at this time may have been grounded in considerations that would be perfectly adequate and sufficient and reasonable in any normal (healthy) woman in her situation; and, that being so, there is no warrant for the analyst-physician taking it for granted that his patient's unwillingness emanated from unknown and repressed "subconscious" (Freud's "Unconscious") motives. The word "*such*" was, then, *an unjustifiable distortion of the facts of the case.*

And as a matter of fact, Renée gave "plausible" reasons for her repugnance to having a baby at this time. Renée's reasons for her conscious repugnance are the facts that she is ill, that she cannot afford it and that she feels incapable of meeting the duties of motherhood. These, I submit, are reasons sufficient to make any sensible woman refuse to bring a child into the world. It is well enough for the analyst to say that Renée's arguments are "rationalizations," but, as a scientist, Professor Baudouin has no right to say that her reasons "were inadequate to explain the intensity of her dislike to the prospect." How intense was her dislike? By what standard of measurement did Professor Baudouin determine that Renée's dislike was abnormal and needed to be analyzed? The hasty reader may reply for Professor Baudouin that Renée's dislike was more than a "dislike," that it was, a "disgust." "The fundamental thing," says Professor Baudouin, "is her disgust." In reply to this I shall ask the reader to note that Renée had not been conscious of any "disgust" until her analyst had discovered it for her in her "subconscious." Our author has told us: "It was not necessary to dig deeply beneath her reasons before discovering an irrational and quasi-instinctive but intense disgust for motherhood."

But even if Renée had been conscious of a sense of "disgust" it might have meant nothing more than the nausea and disgust which are present as normal phenomena in so many pregnant women. As far as I know, no one yet has maintained that this nausea and disgust are invariably, or even often, of a neurotic or psychogenetic nature. Professor Baudouin would, therefore, have to prove his right to analyze such a disgust. If a "sub-

conscious" disgust during pregnancy is a wholly different matter from a conscious disgust, and if it is assumed to be psychogenetic, then, of course, it is subject to analysis; but these are propositions which must first be proved. It would, furthermore, have to be proved that a sensation of disgust, "intense disgust," can be subconscious,—especially as Freud, in agreement with orthodox psychologists, maintains that *sensations and emotions cannot be unconscious*. ("It is the essence of a feeling [a sensation and an affect] that it is felt, i. e., that it is known to consciousness."—Freud, "Das Unbewusste," *Internat. Zeitsch. f. Aertzliche Psychoanalyse*, 1915, No. 4, p. 197.)

As a practical matter, of what value is it to Renée to tell her that she "seems" to exemplify the theory that "such a refusal of childbearing may be part of a general refusal of femininity"? I venture to assert, none whatever. Renée would in all probability tell the analyst that she did not care a farthing what theory her reluctance seemed to exemplify; it was sufficient for her that she had good and weighty reasons for her reluctance even though they did not seem sufficient to the analyst.

Moreover, there is nothing in the dream, or in the associations thereto, to justify the predication of "a general refusal of femininity and a masculine protest, a subconscious wish to play a man's part." Dr. Baudouin had therefore absolutely no scientific warrant for telling Renée that she was so endowed and even less warrant for telling his readers so. If professor Baudouin chooses to adopt Adler's theory and to apply it to his patients in a belief that by so doing he can cure them, he may do so; but he may not append that theory to a dream-analysis in which nothing of the sort can be found and expect us to respect him as a scientist; and he certainly cannot expect us to accept his ideas about dreams and about psychoneuroses without submitting better (more reasonable and more cogent) proofs than what he gives us. *Ipse dixit*s are neither arguments nor facts.

Renée "*certainly* seems to exemplify this theory," says Professor Baudouin. Had he not felt the weakness of his case he would probably not have inserted that word "*certainly*."* But to me only one thing is certain in his analysis of Renée's dream:

*Elsewhere too we find our author using such expressions as "doubtless," "of course," "it is certain," when making the most questionable and doubtful assertions. E. g., on page 290 he informs us that Renée's "homosexual trend," though it is latent and purely [*sic*] "psychic," "doubtless underlies the frigidity in heterosexual intercourse." On page 267 we are told that "it is, certain that, in the causation of dreams, disquietude concerning an organ is more important than the objective condition of that organ," though the truth is probably just the reverse.

that there is nothing in her dream or in his analysis to indicate that she was suffering from "a general refusal of the woman's part." Besides, a woman is not refusing to play a woman's part just because she is unwilling to give birth to all the children with which she happens to become pregnant.

The truth probably is that Dr. Baudouin interpreted the dream as the product of a "subconscious" "refusal of femininity" because Renée had informed him that she "suffers from sexual impotence (frigidity)" and that "once only has intercourse with her husband (whom she loves) been normal." But such a procedure is just as unwarranted as it would be for him to interpret the dream as a subconscious reflection on her sister's "similar impotence." In other words, *there is no apparent or demonstrable connection between the dream and its interpretation, on the one hand, and the facts elicited from Renée in her anamnesis, on the other.*

More serious objections to Professor Baudouin's analysis remain to be considered. *Renée was not guilty of a general refusal of femininity.* Had she been so she would not have married, she would have been one of those women who do not feel the need of a man or of a home of their own, she would have found the thought of marriage too repugnant for her to enter into it, and, above all, she would not have been capable of loving her husband. Yet Renée married and loved her husband—in spite of subconscious homosexuality and a subconscious fixation on her mother and sister.

To Professor Baudouin, and to psycho-analysts in general, *frigidity in a woman* seems to be the invariable consequence of the operation of subconscious or unconscious factors. If it isn't a subconscious "masculine protest" or a refusal of femininity, it is unconscious homosexuality, or bestiality, or sado-masochism, or some other perverse inclination. As far as their case reports show, they almost never think of the conscious factors that can adequately account for a woman's failure to get a satisfactory orgasm during coitus. Satisfactory coitus is not always dependent upon love; love is not even a necessary factor, as the prevalence of prostitution testifies. Skilful technique in the conjugal act combined with the elimination of inhibiting conscious factors, will invariably bring about a satisfactory orgasm. As far as we can ascertain, Professor Baudouin made no attempt to learn whether and what *conscious impediments* interfered with Renée's orgasms. If her husband lacks the necessary skill, or is partially impotent, or has not succeeded in overcoming her maidenly reserve or her habit of masturbating, the analyst's diagnosis of a "masculine protest" will not bring her a whit nearer an orgasm.

The failure to inquire minutely into the conscious or actual factors in a case of sexual impotence or frigidity, or any psycho-neurosis, is the vital defect in the analyses of the psycho-analysts, whether they be of the school of Freud, or Jung, or Adler, or Baudouin, or any other school based on the assumption of hypothetical unconscious mental processes.

To Profesor Baudouin, and no doubt to many other psycho-analysts, a woman's subconscious wish to play a man's part constitutes such a *masculine protest* as amounts to a general refusal of femininity and makes her unwilling to bear children and unable to have an orgasm in coitus. But this is a proposition that would have to be proved; it is not enough to assert it. We all know women who "wish to play a man's part," who resent it that nature made them female, but who, for all that, make good mothers and satisfactory heterosexual partners. If it should be urged in answer to this that subconscious motives and impulses are stronger than conscious motives and impulses, my rejoinder would be that in that case analysis can do a patient no good. It is worth while pointing out in this connection that we have nothing to show that Renée was cured by her analysis; Dr. Baudouin does not tell us that she was. And unless one still believes in miracles one will not believe it possible that an analysis of three dreams and two childhood reminiscences, as reported in eight pages of this book, could have cured her of anything, certainly not of "nervous and sexual troubles" from which she "has long suffered."

Let us now turn our attention to the minuter details of the analysis. Renée dreamt she saw the face of a drowned woman showing above the water in the twilight. The associations to the drowned woman are: a swollen body, a fat woman; her breasts quake; she is repulsive and she laughs.

The analyst tells us that the drowned woman is Renée pregnant. But what reason has he for this conclusion? Absolutely none. Renée did not say that the woman looked like her or that she thought of her as herself. We do not know that Renée is fat; we do not even know how many months she is pregnant. The identification of the drowned woman with Renée is a piece of unwarranted arbitrariness on the part of the analyst, who, as far as his record shows, made no attempt to let his patient identify the drowned woman. Nor is there anything to show that he tried to ascertain what thought or experience had given rise to the dream or was echoed or reflected in any part of the dream; in other words, he looked for no *dream inciter*. He made no attempt to learn whether Renée had ever seen a drowned woman; he did not even ask her to explain the twilight of the dream; he

did not ask her to explain why the woman laughed. Such a technique is not dream analysis.

Dr. Baudouin says that this part of the dream means that Renée is "overwhelmed by the claims of motherhood,—that is why she is "drowned." This may be a clever pun in French but it is valueless as analysis; it tells us nothing about the patient that we did not know before. Besides, where is the evidence of the truth of this "interpretation?" Nowhere. As a matter of fact, I believe Renée's doctor might have made a better guess if he had interpreted this dream to mean that Renée is beginning to realize that the love between herself and her husband is dead and that her continuing to live with him sexually and having a child by him are "disgusting" (in her vernacular). Have I any basis for this guess-interpretation? Yes; in the third dream that she reported to Dr. Baudouin (p. 288) she saw "a young couple quarrelling" and she "thought that the man was wrong and the woman right." (Dr. Baudouin gives us no associations to these elements in Renée's third dream!) Such an interpretation might have brought out important pathogenic matter in Renée's life and might have enabled the analyst to prove really helpful to his patient. At any rate, he might have found good causes for her frigidity and her reluctance to assume the responsibilities of motherhood. The reader may ask whether I consider my interpretation scientifically established? Frankly, no. Why not? Because it is not scientifically verifiable at this distance.

Renée told her analyst that in her dream she saw "a young girl, slender and fresh-looking"—a description which may have fitted her in her girlhood—but he did not ask her to associate to this dream element, thus again losing an excellent opportunity to elicit what might have proved of importance in the analysis. If we had the slightest doubt about Dr. Baudouin's honesty—which we have not—we might suspect that *he reported no associations to this picture in the dream because these did not fit in with his theories or with the interpretation he chose to put on the other facts he elicited from the subject.* A genuine "psycho-analyst" of the orthodox school might have translated "a young, slender, fresh-looking girl" into "an elderly (or old) stout man" and if, by some chance, a man of such a description could be found in Renée's life experiences, the analyst would without the slightest hesitation have made him an unconscious love object or the object of recent or old erotic fantasies. And Renée would have been helpless against such an interpretation; to the psycho-analyst she stands convicted because this image was recalled by her in

the course of her associations instead of having been recalled when she first narrated her dream. *As long as the psycho-analyst deals with an "unconscious mind" his patient is helpless against his interpretations and must submit or quit.*

When Professor Baudouin asked Renée to associate to "pulling out of the water" [*sic*], she is reported to have said: "To pull by the hair.—Lice. Itching. A dirty comb which combs out lice." In connection with this several remarks and objections occur to us.

1. *Why did the analyst pick out as the "stimulus words" the words "pulling out of the water"? Why did he not ask Renée to associate to "stretching out the hand," or "the body disappears" or "the breasts quaking," or "laughing," or merely "quaking" or "disappearing?"* Surely any one of these words or ideas would have elicited quantities of matter which might have proved of the greatest value in throwing light on poor Renée's illness. The analyst's failure to do so and to explain to us why he selected one group of words and neglected to select other groups of words—sins of commission and omission wherein he does not differ from any of the other psycho-analysts—prove the analysis of dreams in psycho-analysis to be a wholly arbitrary, capricious and wilful procedure which is worthy only of the miracle worker, the Christian Scientist, the Chiropractor, etc., or the therapist whose only concern is the cure of his patient, but is not worthy of the scientist; such a technique cannot be considered a scientific procedure.

In connection with this I may stop to point out the wilfulness of the analyst's dropping the words "the body" out of Renée's "to pull the body out of the water" and asking her to associate to the abstract idea of "pulling out of the water." This procedure is perfectly typical of orthodox psycho-analysis. (Elsewhere in this Journal [p. 197] I have cited an example of a dream analysis in which Professor Freud arbitrarily added a significant element to the dream which made it suit the interpretation he wished to put on it. Professor Baudouin is guilty of a similar piece of arbitrariness and for the same purpose.) If the analyst may do such things with the products of his patients' minds, *he can read into their dreams and symptoms whatsoever he pleases.*

2. As far as his book shows, Professor Baudouin halted the first group of his patient's free associations when she reached the words "I always thought pregnancy disgusting," and the second group when she reached the words "A dirty comb which combs out lice," though in both instances she had spoken only a few words. Now, there can be no question that *Renée could have gone on "associating" practically for hours if she had not*

been stopped. Why did Dr. Baudouin stop her at those two points? Evidently and unquestionably because these two utterances of hers fitted in or could be made to fit in with the analyst's theory of her case; in connection with these statements of hers *he could lecture her* by pointing out to her that here we have proofs furnished by her Unconscious that she objects to being pregnant and has to resort to masturbation because she refuses the woman's part (i. e., she does not want to discharge her natural obligations and duties). Better proof than this can nowhere be found that *the psycho-analytic "interpretation" of dreams is a process of purposive suggestion* but not the scientific application of scientifically verifiable facts in the study and treatment of psychoneuroses.

If Professor Baudouin did obtain other associations from Renée, he should have reported them, so that we might be permitted to form our own conclusions and to check him up in his interpretations, or he should have told us that he omitted her other associations and his reasons for doing so; his failure to do so proves that he presents his readers, lay and expert, only with as much data as he thinks will establish his interpretation. That such a procedure is not scientific is the least that can be said about it. And it is not unimportant to add that in these breaches of scientific method Baudouin is not a whit a worse offender than all other psycho-analytic dream interpreters.

3. In a footnote Dr. Baudouin tells us that Renée's "dirty comb which combs out lice" is "possibly (!) an allusion to masturbation." Is it because of this possibility that he stopped Renée's associations when she reached this point? If so, he stopped her when he got to something which he thought could be made to fit in with his preconceived interpretation of the dream.

What good can it do Renée to tell her that in an indirect and remote association to an element occurring in her dream there is a "possible" allusion to masturbation? Renée knows that she masturbates and that it has given her more satisfaction than coitus, and, as far as we know, that she indulges in the habit without disgust, perhaps even with a clear conscience. It seems to us that her analyst tries to link up masturbation with "a dirty comb which combs out lice" so that Renée might become disgusted with her source of substitute-gratification and be induced to give it up. That may be all right as therapeutics but it is not scientific dream analysis.

4. Professor Baudouin made no attempt to ascertain whether his patient had any memories in connection with "a dirty comb", etc., and yet there can be no doubt that she probably had such memories. Whether these would have had any bearing on her

neurosis or on her frigidity is immaterial to our present discussion. All we are concerned with now is to point out the psycho-analyst's arbitrariness in assuming that "a dirty comb," etc., may be a symbol for onanism. Apart from the question whether such a comb is ever employed as such a symbol, the important thing for us is to learn whether it ever had such a symbolic signification for *Renée*, and, secondly, whether it had that meaning for her *now*. Professor Baudouin's book gives no evidence that these questions had ever occurred to him, but the reader surely sees the relevance of these questions, and the answer one gives them to the whole theory of dream interpretation.

When is a dream element to be taken literally and when is it to be interpreted symbolically? The psycho-analysts nowhere answer this troublesome question, although Professor Freud does say that he regards a dream element as symbolic if the patient has no (!) associations to it.

An even more important question remains to be put and answered: *can a dreamer introduce a symbol into his dream if he is ignorant of such a symbol during his waking state?* The psycho-analysts answer this question affirmatively, notwithstanding the absence of anything resembling evidence in its support. Psychologists, on the contrary, deny any such possibility.

Both Freud and Jung say, in substance, that *we dream as our ancestors thought, and as children think to-day*. According to them, in the language of Baudouin, "the conceptions which presided over the languages, laws, and religions of primitive men, reappear in us in the form of dreams." In our dreams we may recognize even the motifs of ancient myths. This is no doubt an engaging and ingenious theory, though "speculation" would perhaps be a better designation for it. But why may we not push the speculation a step further and say that *in dreams man "regresses" not merely to the earliest stage in human development but to the mentality of the monkey?* *Renée's* dream analysis could be manipulated so as to furnish "proofs" of the correctness of this theory, absurd though it really is. In support of such a theory it could be argued that monkeys masturbate, masturbate shamelessly and publicly and without any manifestations of disgust. Furthermore—and here we have a striking bit of evidence—monkeys are on extremely intimate terms with lice (!) and love to "pull out" vermin from one another's bodies. The fact that monkeys live in trees would serve to explain the many *dreams of flying and falling* from which probably no human being has been free. The *apprehension* which is so constant an element in the neuroses and in so many dreams would be regarded as a repressed reminiscence of the monkey's fear of falling (*Cf.* H. Ellis, *The World of Dreams*, 1911, p. 133) or other things

(the thunder, lightning, large beasts, etc.) monkeys are afraid of.* By this theory the "*castration complex*" would symbolize the monkey's uncertainty about the stability of the twig or branch to which he used to cling. The monkey's fondness for gazing at his reflection in the water (mirrors) would explain the narcissism of Narcissus and of neurotics. The "*anal-erotic complex*"—without which psycho-analysis would be seriously handicapped—could be easily enough explained on this theory by those familiar with the habits of monkeys. The stammering and anorexia of neurotics could be referred to the monkey's too well-known "*secondary (buccal or oral) auto-eroticism.*" In fact, any one of the many complexes occurring in "normal" and "abnormal" human beings could be accounted for on this theory. The value of such a theory, in the treatment of neurotics might prove very great. Thus, for example, Renée might be persuaded to believe that her "general refusal of femininity" and her "masculine protest" are due to her unconscious tendency to regress or degenerate to a monkey.

If it is true, as has been averred (S. E. Jelliffe, *The Technique of Psychoanalysis*, N. Y., 1920, p. 57), that "the whole [!] psycho-analytic scheme will have little value" to a patient who is "an out and out opponent to any evolutionary hypothesis," then the above theory of dreams and neuroses would have decided advantages over the orthodox theories, for it would prove acceptable to the prejudices or convictions even of those who regard monkeys as degenerated human beings. And needless to say, such a theory would strongly commend itself to the friends and relatives and even physicians of unpopular neurotics. (And what neurotic is popular?)

What, then, it may be asked, is scientific oneirology and what is *the value of dreams in psychotherapeutics?* The answers to these questions are not difficult. Oneirology, strictly speaking, is the study of dreams, not the interpretation of dreams. The interpretation of dreams, as practised by psycho-analysts, is not a science but the application of a mystical theory derived from the superstitious notions that dreams were symbolic prophecies, or that through dreams the gods communed with mortals, or that dreams were due to the agency of good and bad demons, etc.

*This theory gains additional support from the fact that flight in dreams usually consists only of a succession of "light bounds, each bound clearing from ten to twenty yards," "is not the sustained flight of a bird or an insect, and the dreamer rarely or never imagines that he is borne high into the air." H. Ellis, *l. c.*, p. 132.

In psycho-analytic dream interpretation (oneiromancy?) the wicked demons, the succubi and the incubi which were at one time held responsible for dreams, are replaced by wicked and filthy desires, which had been repressed, and no dream may be considered to have been interpreted unless one has discovered in it the influence of at least one "pathogenic wish." (Cf. S. Freud, "Die Handhabung der Traumdeutung," *Zentralb. f. Psychoanalyse*, 1911, p. 111.) It must be said, however, in justice to Dr. Baudouin, that he says that though "in the main" he accepts Freud's theory that dreams are the imaginary and "disguised" fulfillment of repressed sexual wishes, he prefers to say that "the dream manifests the symbolical [not "disguised"!] realization of an unsatisfied [not "repressed"!] tendency.")

What dreams really are, as far as the present state of knowledge will permit one to say, the reader will find summarized in the present writer's analysis of a case of "Hysteria with Facial Paresthesia," in *Psyche and Eros*, Vol. 2, No. 4, pp. 236-237. I say there:

"My interpretation of [Mrs. A's] dream was based on the obvious facts that *all of us are just as apt to dream about our desires as about our fears, our doubts as our convictions, etc. . . .* Dreams do, undoubtedly, often represent the imaginary fulfillment of wishes, sometimes (perhaps often) of 'repressed' wishes. But they just as undoubtedly often represent the occurrence ('fulfillment') of our fears. These wishes and fears may relate to either our past, present or future. The fact is, that *we do not stop thinking when we fall asleep; the thoughts that occupy our minds just before we fall asleep are carried over with us into our sleep and are there represented (thought of) pictorially. . . .* Because of the conflict between the wish to sleep and the wish to think [or to be awake and doing], and because of the fact that our attention is at a low ebb and that with sleep the rationalizing [as well as the critical] faculty is in abeyance, our 'thinking' goes on almost exclusively in accordance with the law of associations. (We see this even in our fantasies by day.) By virtue of time, place and sound associations, etc., all sorts of heterogeneous memories are stirred up and represented to the mind pictorially—and this constitutes most dreams, *a congeries of loosely associated memory pictures.* Inasmuch as all our life is bound up with wishes of all sorts, wishes—and even forbidden ('repressed') wishes—may thus get into our dreams, just exactly as fears, doubts, reflections, trivial thoughts, etc., may. We dream because we are alive and have [living, active] brain cells, not because we wish to sleep. We are never, or only rarely, so profoundly asleep as not to know we are sleeping and

dreaming; that is why we are often able to awake from unpleasant dreams—they make the sleep too distressing. . . . Of course, sexual matters get into our dreams and are represented symbolically. Why should they not? Sexual thoughts occupy an extremely important place in the thoughts of mankind and are always clamoring for expression, especially when the mind is not attending to more immediate and pressing problems. It is certain, too, for obvious reasons, that sexual ideas are most actively assertive at night. That they are [often] expressed symbolically is due to the fact that the sleeping or hypnoid mind cannot think any other way about anything.”

From the above it follows that *the psychoanalyst*, i. e., the therapist who treats psychoneuroses by helping patients to get an understanding of their psychology,* has, in his patient's dreams, one of the most *valuable aids to the exploration of the invalid's mind*. Dream analysis is not the royal road or the only road to the wealth of ideas, fears, suspicions, disappointments, longings, urges, doubts, disillusionments, aspirations, judgments, reflections, etc., stored up in the psyche of the neurotic, but it is of inestimable value in persons who are not of an introspective or imaginative nature and who find it difficult otherwise to recreate their past in the attempt to ascertain what conflicts, disappointments, etc., gave rise to their illness.

PSYCHANALYTIC SKETCHES: No. 2.

By S. A. Tannenbaum, M. D.

It was about 7:30 P. M. when Mr. and Mrs. R. entered my consulting room. He is about forty-five years old, short, slight, flabby-looking and timid; his hair is sable-silvered; his voice is small, thin, high-pitched and almost laughably effeminate. All in all he gives the impression of a gentle, henpecked and thoroughly subdued husband and an almost completely self-effacing man. She looks much younger than he, though she is forty-one years old; her eyes are bright and sparkling; her face is animated; her lips seem to have a permanent smile about them; her hair is dark brown, her teeth are nice and in good condition; her clothes are much better than his and suggest an ambition to be well-dressed. She gives the impression of a coquettish woman married

*The “*psycho-analyst*,” on the contrary, treats psychoneurotics by interpreting their symptoms and dreams in terms of hypothetical unconscious mental processes. The difference between *psychanalysis* and *psycho-analysis* is comparable to the difference between graphiology (the science of bibliotics) and graphology (the art of reading character from the handwriting),—the one is a science and the other a pseudo-science.

to a man much older than herself and not incapable of getting herself involved in entangling alliances. When they are seated, Mr. R. informs me, with a kind of smile which seems to say "Now be prepared for a surprise": "This is my wife; *she* is the patient."

Cross-examining them both and letting one correct or supplement the other's statements, I get the following case-history:

They have been married nineteen years and have three children, aged respectively, eighteen, sixteen and thirteen; they live in a four-room apartment and keep no "help." Mrs. R. has to do all the housework herself but gets a little assistance from her oldest daughter.

Mrs. R. has been ailing for almost ten years, perhaps a little longer. Her illness is steadily getting worse and her sufferings are unbearable and "fearful to see." At times she is quite well, but about once every two months she gets attacks, which begin at night, usually waking her from sleep, and last twenty to forty-eight hours. These attacks consist of an overwhelming sense of pressure about the heart, right over the stomach, and a feeling as if she were choking and would never again be able to draw breath. Alarmed and panicky she manages to sit up in bed and pant for breath; her lungs and throat seem to be filled with mucus; there is an uncanny rattle in her chest, she vomits once or twice, her eyes are wild and staring, and in addition she complains of a severe pain on top of the head. When the attacks pass off she is alright but exhausted.

Doctors have made all sorts of diagnoses and several operations have been performed in a search for gastric ulcer, gall stones and adhesions, but she has notwithstanding grown steadily worse. Now the attacks come oftener, are more severe, last longer and leave her more prostrated.

Her family history and personal history offer us nothing that has any bearing on her present illness. She has had some of the usual illnesses of childhood and has a chronic endocarditis. Her girlhood and adolescence were uneventful from a medical viewpoint. Her married life is happy, she wants for nothing, her husband is good to her and gives her all he can afford, and her children are very good.

Careful physical examination shows valvular disease of the heart, the pulse rate is normal, the blood pressure is a little low, the blood is slightly anemic. The thorax and abdomen reveal nothing pathological. Eyes not protruding, thyroid gland not enlarged; no glandular enlargement anywhere; reflexes (patellar, pupillary) normal. Uterine functions normal, uterus and adnexa normal. She is always careful about what she eats.

Physical diseases can therefore be ruled out as the cause for her attacks. The condition must be psychoneurotic. She denies having any fears and has no distressing dreams. Sexually things are not right, but she does not care anything about that. Yes, the first few years after marriage things were different; she doesn't mind admitting that she was of a passionate nature then but the arrival of children and economic considerations made it imperative to resort to prevenience. Coitus is indulged in but rarely and is always interrupted. They did not think there was any harm in this and no doctor had ever questioned her about the matter although she has noticed that her attacks always seem to come the day after such a frustrated coitus. If I can suggest a form of prevenience that is free from danger (conception, disease), they will follow my advice and be very grateful.

The above case is of interest not only as showing again the pathogenic significance of an unsatisfactory sexual life and the injuriousness of coitus interruptus to the woman, but as showing that one may have a distressing psychoneurosis without any morbid fears or distressing dreams. The case also shows the value of a knowledge of psychanalysis in the general practice of medicine and the harm resulting from the general ignorance and squeamishness about sex which characterizes the medical profession as a whole.

How the symptoms in this woman were determined I do not know. A psychanalytic investigation might enable us to ascertain why she suffered from these symptoms and not others, but that would hardly be worth while for her symptoms are, in all probability, the manifestation of a sexual toxemia resulting from an accumulation in the blood of chemical substances liberated or generated prior to and during coitus. Normal coitus probably brings about the elimination and oxidation of these substances and thus begets that state of euphoria which characterizes the satisfied individual.

POSTSCRIPT:

Just seven weeks after my first (and only) interview with Mrs. R, her husband calls. He looks aggrieved and everything about him suggests disappointment. They have followed my advice to the letter and Mrs. R. has even "been away in the country for two weeks," but she just had another attack. It is true that this attack was not so severe, did not last so long as previous ones, and also began within twenty-four hours after a conjugal embrace, but none the less it was an attack.

The occurrence of an attack under circumstances which leave

no room for doubt as to the sexual nature of the malady induces me to question Mr. R more fully about their sexual life than I had previously done. Reluctantly he supplied this additional information: he has been suffering from *ejaculatio precox* from the time of his first attempt at coitus (at the age of 17; he has never had any venereal disease); introitus in vaginam is almost instantly followed by the emission; his wife is amorous only just after her menses and repels his advances at any other time "because she doesn't want to get excited for nothing"; titillatio vulvae cum digitis sometimes (very infrequently) causes an orgasm or prepares her for an orgasm, but she is so "cold" that she rarely submits to these attentions; coitus condomatus has many drawbacks.

The matter, then, is not so simple as it at first seemed to be. The wife's ill-health is the direct result of the husband's partial impotence. How to cure him is not an easy matter. The administration of drugs will not do him any good; his malady is psychically determined, and drugs, apart from their suggestive value, cannot help him. Suggestion is of no value in these cases, especially if the patient has been impotent for many years and has become confirmed in the belief that he is impotent. Prostatic massage or other local treatment is of no value other than as exerting a suggestive influence. Treatment with sounds and bougies may cause a great deal of actual physical damage. The only treatment that can possibly do any good is some form of psychotherapeutics that will re-establish the patient's confidence in himself and get rid of his excessive anxiety when sexually excited. A tactful and sensible wife, free from squeamishness and acquainted with the psychology of the situation, can do more good than all the doctors combined. Psychanalytic treatment in a man having Mr. R.'s financial worries is out of the question. In a social system in which the possession of private property would not be the be-all and the end-all, such patients as Mr. R., and other psychoneurotic individuals, would not be debarred from appropriate treatment and would not be exploited by millions of quacks,—assuming that a psychoneurosis could arise in such a millennial state.

So much for him. But what is to become of his wife? Must she go on with her symptoms till death parts them? Is she doomed to suffer as long as she lives (the sexual impulse never dies) and be a subject for successive "exploratory operations"? These questions cannot be answered without some very plain speaking. Abstinence and sublimation are out of the question for them, considering their age and history. She must be made to realize that her husband's cure (and therefore also hers) lies largely

in her hands. She must throw off the mask of frigidity; must let her natural impulses guide her to encourage him to attempt coitus often; must not take a preliminary failure seriously or let it discourage them from a repetition of the function after a short interval (an hour or two or a day or two); must remember that the excitement which results in premature ejaculation is done away with if the intervals between successive attempts are not long; must not be squeamish about being the first to make advances; and she must not insist on coitus interruptus or c. condomatus. (There are more certain and less injurious preventive measures.) Had they been given a proper "sex education" at the right time they would have been spared a great deal of unnecessary suffering and would not need to be instructed now.

Abstracts and Translations

THE FEAR OF CATCHING COLD

In the *Internationale Zeitschr. f. Psychoanalyse* (1923, No. 3, vol. 9.) Dr. Ernest Jones, in an essay on 'Cold, Disease and Birth', maintains that the widely distributed popular and medical fear of cold air as a cause of disease is so unjustified by facts that it must be an obsession, and, being an obsession, calls for psycho-analytic interpretation. The matter has, he thinks, practical significance because the failure to understand the symbolic nature of the fear of cold air leads to conduct (keeping the windows closed, etc.) which tends to beget certain diseases, especially those of the respiratory organs (rhinitis, bronchitis). He believes that there is no basis of fact in what he calls the "absolutely superstitious" notion that a draught of cold air can cause any such diseases, and, of course, even less such diseases as hepatic abscess, pericarditis, peritonitis, tuberculosis, pleurisy, gastritis, salpingitis, etc., though the medical text-books of the previous generation attribute these maladies to "catching cold."

An immense amount of folklore beliefs shows how great was the attention humanity gave the subject of health and how overwhelming was the need for a belief that it understood the nature and causes of disease. To be free from the feeling of uncertainty in this regard, humanity invented all sorts of fantastic explanations and among these cold air was considered one of the most important. The superstitious nature of this particular belief is proved by numerous palpably irrational elements, e.g., the belief that "night air" is especially dangerous, that cold air is most dangerous if it strikes the individual from behind or affects the feet or the neck, and that cold air which enters through a small opening, especially through a keyhole, is more dangerous than other varieties.

Though modern science knows that germ infection is the true cause for many of the diseases previously attributed to the injurious effects of cold air, the superstition about cold air is so deep-rooted in humanity that even current text-books still make "catching cold" the essential condition for the occurrence of many diseases. So that even today mankind is as much afraid of cold air as it was before the days of Pasteur and Koch.

Jones attributes this serious error to several factors: 1) the fact that most of the infectious diseases begin with a chill and great sensitiveness to cold (This initial stage is mistaken for

the cause of the disease); 2) cold air does cause a mild degree of irritation of the respiratory mucous membranes (Because the symptoms of the infectious respiratory diseases resemble the ordinary "cold," the laity attribute both conditions to the same cause); 3) cold air causes fear and discomfort because it suggests the danger of separation from the herd (Trotter). Jones would accept Trotter's explanation if he substituted "the mother" for "the herd." These more or less rational explanations do not satisfy Jones and he offers us the following psycho-analytic explanation:

What ideas in the Unconscious, he asks, correspond to the elements in the formula: "Cold air is the cause of disease"? Then he informs us that "the commonest and most fundamental unconscious conception of disease is that of an injury that cripples. This affliction, it is instinctively assumed, has been inflicted from without and with a sadistic or hostile intent." The person guilty of the injury (sickness and even death) is invariably the father; "the injury, like every injury, is ultimately castration." Most recent psycho-analytic studies have shown that the unconscious idea of castration emanates from four sources: 1) threats of losing the penis (fear of retribution by the father); 2) depriving the child of the pleasurable association with its faeces (which are identified with the penis,—Jones); 3) weaning the child from the breast (Staercke), and 4) losing the mother's body in the act of birth (Alexander). Ferenczi has "shown" the tremendous psychical significance that being born must have for the child. The child must, say Freud and Ferenczi, feel great resentment and suffering during this banishment from paradise. "When the painful act of birth is over, the child's most palpable sign of the 'castration' he has just suffered—the expulsion from the nest which was formerly as much his as if it had been a part of him—is surely the perception of cold air. The discomfort which accompanies this change in temperature betokens the revolution in its existence and its whole life will depend on its (repugnant) reaction. No wonder, then, that *the prevailing impression which one thus gets at the threshold of life is ever afterwards associated with ideas of discomfort, uncertainty, danger, and even bodily injury.*"

"Catching cold" is unquestionably the cause for a very large number of ailments and the predisposing cause for many others. It does not cause hepatic abscess, tuberculosis, salpingitis, etc., but it does cause or initiate many pathological conditions, e. g., acute rhinitis, pharyngitis, otitis media, conjunctivitis, sinusitis, bronchitis, lumbago, torticollis, pleurisy, neuritis, facial paralysis, cystitis, sciatica, etc. The experience of the race proves this.

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Before we knew about germs and infections it was natural for mankind to attribute its diseases to environmental factors as well as to supernatural forces. It was therefore, especially in the light of everyday experience, most natural and scientific to make exposure to "cold" a cause for disease. Needless to say, sooner or later superstitious notions grew up around cold air as they did about everything else. Even though cold air cannot cause hepatic abscess and gastritis, it can "cause" or initiate enough and sufficiently serious maladies to make us careful in the way we expose ourselves to it. One who has seen a person get out of a warm bed, be exposed to a draught or a chilling of the body, develop a broncho-pneumonia and then perhaps go on with chronic pulmonary tuberculosis, will not soon forget it nor belittle the dangers of "catching cold," even though cold air does not cause tuberculosis.

To be quite accurate, "catching cold" is not merely a matter of cold air but usually a combination of cold air and damp, although sometimes exposure to damp or moisture alone is sufficient to cause a "cold."

The relation of a fear of cold to the act of birth is wholly fantastical and lacking in anything capable of scientific verification. There is not the slightest iota of evidence for a belief that a person remembers anything of the sensations he experienced in being born. (As to this see MacCurdy's "Problems in Dynamic Psychology," 1922, Chapter 13.) Besides, children just born are almost never exposed to cold air for any considerable length of time; just as soon as they are born they are carefully wrapped up in warm blankets. In many parts of the world the child is born into air that is warmer than the mother's body, and yet even there the inhabitants are afraid of catching cold. Man's Unconscious cannot inherit from his primordial ancestors a fear of cold air in connection with birth—for mankind must have first come into the world in a tropical climate.

And it is a wholly unwarranted assumption that the newborn child is made uncomfortable and resentful by its contact with the air. For aught we know to the contrary, it may be extremely grateful for being released from a dark and watery environment in which it was so long and so monotonously cribbed, cabined and confined. One who has attended many deliveries certainly has the impression that the newborn are a rather contented lot; in fact, very often they are so self-satisfied as they lie there blinking at the light and chewing at their fists that it is not an easy matter to make them cry. And we all know how fond babies are of being naked, *i. e.*, of being exposed to the air—even before they are old enough to be exhibitionistic.

There is no more reason for calling the child's first contact with the air "the prevailing impression" than there is for so designating its first contact with the light. And if the first impression with the air becomes the basis for a subsequent obsession, why does not humanity have the same obsession about light? By psycho-analytic logic all male-kind ought to be impotent because of painful memories associated with the birth-canal.—T.

THE ENDOCRINE SIDE OF PROSTITUTION

The endocrine factor in prostitutes comes in for some consideration by Giuseppe Vidoni in a little book which has just reached us ("Prostitute e Prostituzione", Casa Ed. S. Lattes & C., Turin and Genoa, 1921, p. 31-35), dedicated, by the way, to Cesare Lombroso, the great Italian criminologist and psychic investigator. As we know, says this author, ovarian hypofunction may induce characteristics of virilism, due to the fact, as taught by Pende, that in certain circumstances the activity of the elements likely to maintain and protect the characteristics of the particular sex becomes attenuated, while that of the rudimentary ovarian elements which supply virilogenetic hormones awakens. This, however, is not sufficient:

"We have seen how all the authors have pointed out the frequency of marked precocity of the sexual function in prostitutes, a fact which I, too, was able to place in evidence with conspicuous examples. In this condition, as we have stated, efforts were made to discover a true atavic characteristic, bringing out the fact that the greater or lesser sexual precocity is in harmony with the race, as it is, moreover, we may add, with the climatic, economic, social, nutritional, hygienic and other conditions."

Vidoni also relates that Rousseau used to say that in certain of the Italian provinces he had come across strong and robust boys with an absence of sexual manifestations and also well-developed girls who had never menstruated,—circumstances which he attributed to simplicity of costume and the absence of artificial excitement, etc.

While not losing sight of the importance of all these factors in the development of puberty, it is nevertheless true, he proceeds, that sometimes the anticipated appearance of puberty "cannot be accounted for by causes of more immediate action, *i. e.*, by phenomena of precocious hyperovarism." In this way we "can understand the appearance of menstruation at an early age and in part, also, the precocity of sexual relation, inasmuch as we know that in the symptomatology of hyperovarism there may exist a conspicuous exaggeration of the sexual appetites."

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It is of importance, too, to remember, says this Italian author, that:

"The syndromes imputable to the ovary manifest themselves quite frequently in such a complicated manner that it is a well-known fact that side by side with phenomena of partial hyperovarianism there may exist phenomena of a hypofunctioning capacity on the part of the ovaries. . . ."

The author feels justified in remarking, too, that at the menopause, in which such profound alterations occur in the gonads, changes are simultaneously observed in the sexual life, these changes being neither few in number nor unimportant.

By way of further amplification of these alterations, Vidoni remarks that modification of the personality as observed by a number of French and Italian authors may also be connoted by marital infidelity and kindred irregularities. Venturi, for instance, stated that in the climacteric some women are overcome by an anomalous tendency in the direction of eroticism. Attempts have been made to account for these facts also by glandular modifications, inasmuch as in the latter is seen a confirmation of what is already observed in puberty.

As evidencing the fact that the importance of the endocrine factor is not restricted to the gonads alone but should also be made to embrace other glands, either through direct relationship with the sex glands or through what may be primitive lesions, this author cites the not infrequent presence of mongoloid elements in prostitutes.

"It is true that in such cases these characteristics, in Italy also, may have a close ethnical significance, as demonstrated by Livi and as I myself had occasion to observe. At all events, although recognized that mongolism has its origin in manifold causes, it is now generally admitted that among these causes insufficiency of the thyroid and also of other glands of internal secretion occupies a decidedly important place.

The author next refers to the significance which the endocrine element may have in criminal and psychiatric anthropology, the importance of which factor such Italian authors as Pende, de Sanctis, Ottolenghi, Buscaino, Morselli, Montesano, *et al*, were not slow to recognize. The first to assert this in a categorical manner was, however, Carrara, who among other things, "drew especial attention to the fact that in sexual delinquents, especially rapists, as compared with other criminals, a low stature is more frequently met with."

Now, according to Carrara, the two terms "low stature" and "more lively sexual aggressiveness" may be connected with alterations of the glands of internal secretion and, in particular, with

a hypersecretion of the genital glands. Pende, too, comments on the undoubted importance of anomalies of the internal secretion of the gonads, adding that the proof should be found in "the frequency in sexual criminals of stigmata of hypergenitalism or heterosexualism,—in other words, masculine traits in criminal women and feminine traits in male criminals. As Pende says—in final analysis, the psychic personality of individuals is derived from the individual endocrine formula.

While this latter statement may appear to some to be too rigid, nevertheless, comments Vidoni:

"Endocrinology on the one hand, and psychiatry and criminal anthropology on the other hand, have already on several occasions brought out in an unmistakable manner the intervention of the glands in the manifestations of psychic life."

He cites Lugaro and Papillaut, who brought out clearly the significance of the thyroid gland in psychic manifestations which may lead to crime. In this connection he reminds us that the thyroid has been called not only the gland of emotion but also the gland of intelligence.

Without reviewing those symptoms which have been signalized in prostitutes and "which may be accounted for in an altered functioning capacity of the endocrine glands, "Vidoni remarks that it will suffice to emphasize that the sex hormones, insofar as relates to the psyche, have been recognized as having an influence relating not only to sexual life, but also to the mentality as a whole.

"In so far as regards our own study, this circumstance should be taken into due consideration not only in its general sense, but also because in women affected with ovarian alterations manifestations frequently have been observed which are peculiar to the virile type not only in the morphologic field, but also in the psychic. This much said, it does not appear to me inopportune to recall that recently important studies on homosexuality and hermaphroditism (in perfect harmony, as Carrara takes occasion to point out, with the purest Lombrosian concepts) shed not a little light in this field, bringing out the deserving importance of the glands of internal secretion."

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AGAINST ABOLITION OF BROTHELS.

Dr. J. Schwink (*Münchener Medizinische Wochenschrift*, May 18, 1923) reports the unanimous protest of the Health Council [Gesundheitsrat, something like our Board of Health] of the City of Nuremberg against the abolition of brothels, proposed by the Bavarian ministry of the Interior.

In order to find out how frequently sexual intercourse takes place in the brothels, the number of visitors during the last week of February and the first week of March was registered and the following results were obtained: Each one of the 46 inmates received daily 6 to 47 men, who had sexual intercourse. Not included in this number are those men who were found infected and therefore rejected by the girls. The number of these males was 90.

Of 843 unregistered prostitutes picked up by the police in the streets or private rooms, 268 were found diseased, that is to say 2.22 per cent. diseased inmates of brothels as against 32 per cent. infected free lances!

SEXUAL ASSAULTS ON CHILDREN.

Sexual assaults on little girls in England must be very common to have called forth a discussion on the topic in the House of Commons. One male member and the two lady members of Parliament, one of them our own Lady Astor, made speeches on the subject, which we reproduce below. The Home Secretary, however, did not seem to be very much alarmed, or impressed, and while expressing his sympathy, did not give any great encouragement to the participants in the discussion.

MR. BRIANT:

"I want to call attention to the necessity for the protection of children who are helpless . . . I am extremely anxious that the Home Secretary shall consider whether it is not time he should issue some form of circular to the magistrates' and other courts calling attention to the comparatively small penalties inflicted for what seem to me to be the most terrible, loathsome offences that are known. I am fully aware that the subject on which I want to speak is one which most people naturally avoid and evade, but it is no use evading the facts that exist. It is quite time the public and this House should face the facts, however loathsome. If they are horrible to hear, they are still more horrible to endure, and at the risk of offending the sensitiveness of any hon. Member, I want to point out what is occurring now as an additional reason why the Home Secretary should exert his great interest in en-

deavoring to have a more full comprehension of the terrible nature of the assaults which are continuing every day. In the case of assaults on children, a police court can only inflict a penalty of six months. I suggest that it is most desirable that all these cases should be sent to the Sessions, where a heavier penalty can be inflicted. But my chief grievance is that the courts of magistrates, who have power to inflict at least six months, will not do so, and they impose penalties which would be ridiculous if they were not tragic in their leniency for the most horrible offences. I want to give the House some definite cases. I am not a sentimentalist. For better or worse, my life has been spent in a certain way in which I happen to know some of the depths of wickedness, and I want to make certain definite statements.

"In a case of indecent assault on a child of nine the penalty was four months' imprisonment. About the same time a man received five months' imprisonment for hanging a Pekingese dog. In another case of assault on a child of six there was a sentence of one month's imprisonment, in another on a child of seven, in which the man who was convicted gave as a reason that the child had given him any amount of encouragement, the total penalty was a fine of £3. It is a ridiculous punishment for a most serious offence. There are worse cases than these. There is a case of a child of seven in which the man was only bound over. In another case, in which the child is or was about to become a mother, the sentence was one week's imprisonment. Can you wonder that people are beginning to think that property is much more honored and respected than persons? The House would be full of excited Members if there was an attack on the price of beer instead of attacks on innocent children not old enough to know evil from good, the victims of assault of the most atrocious and horrible character. I know these facts are not pleasant, but the House and the outside public should know the facts in order that public opinion may be roused, and that there may be an attempt, at least, to make the Courts do all that they possibly can, by pressure being brought upon the magistrates, to deal with this class of man more severely, and to give him the extreme penalty. There is a case which has been under my own observation of a child of 12 which is losing its sight through communicated venereal disease. We are very indignant about our small grievances. If our train service is bad we write letters to the 'Times' about it, but few people ever raise their voices for the sake of these children, who are being practically murdered, body and soul. These outrages are going on more than people know. Some of the assaults are almost too horrible to relate. I have not exaggerated in anything I have said.

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"I do not wish the punishment to be vindictive, but if it be true that some of these men are abnormal, and probably it is true, then that is all the more reason why children should not be subject to their assaults, and all the more reason that whenever there is a chance of segregating these men, it should be taken advantage of by the magistrate or the judges. Many of these men are probably the victims of some kind of delusion. It may be that they are mental defectives but the danger is so great that when the law has an opportunity of protecting children from such persons the opportunity should be taken. This House consists almost entirely of men, but it should not allow this question to be, as it has been in the past, a woman's question. It is my sex that is responsible, and all the more shame to my sex that the money that is required to save these poor children's lives has to be largely appealed for to women.

"The Home Secretary is as tender-hearted as I am, or as any other Member of the House, and knowing the facts, as I hope he knows them, I trust he will take action. If he does not know the facts, I hope he will study them. I speak with confidence when I say that he will use his influence to stir up the laggard magistrates, and to make them feel that a magistrate who passes a penalty of a £5 fine for this atrocious and loathsome offence, and then sends a man to prison for stealing a pound of apples, is guilty of a travesty of law and justice. It is time that our courts should be cleansed of men who have so little appreciation of what is just, right and wrong. I appeal to the Home Secretary to consider whether by circular or otherwise he could not make the magistrates feel their responsibility in this matter, so that it may not be a lasting shame, as it is, to our manhood, that children should be sent out into the world with ruined bodies, and one might almost say with shattered souls."

VISCOUNTESS ASTOR:

"I want to add a word to the excellent speech made by the hon. Member for North Lambeth (Mr. Briant) on the question of assaults on children. It is one of those things which makes one either see red or weep tears of blood. There is nothing in the world more tragic than these cases of child assault. If anything is liable to rouse what one might call class consciousness it is the fact that a man can get six months for stealing a Pekingese, and another man should only get six months for assaulting a child. I am not blaming any section of the community, but I am blaming the public conscience. I remember years ago the late Member for the Sutton Division of Plymouth was made

an ardent supporter of women's suffrage by a case of child assault. A man was brought up for a most horrible and ghastly assault on a little girl of seven, and another man was brought up for stealing. The man for stealing got two years' imprisonment, and the man for the child assault got six weeks, and the judge remarked 'This is the kind of thing that might happen to any man.' That made an ardent women's suffragist of the late Member for the Sutton Division of Plymouth.

"I know how uncomfortable it is for men and women to speak of these things, and I know what any mother would feel and what any father would feel. I believe the fathers feel it even more intensely than the mothers. They would feel that they would far rather their children were murdered outright than be ruined morally and physically by these ghastly assaults. The most of the girls who do wrong, certainly an enormous percentage of them, are girls who have been assaulted by men when they were children. That is a very serious thing. It has a psychological effect on the child's mind. That is proved by every social worker. Some people say that the man is not a criminal. If he is a criminal, he ought to be put into prison, and if he is abnormal he should be treated as abnormal. I implore the Home Secretary to do all that he can to change the law which deals so lightly with the very worst sort of crime.

"In dealing with girls who become prostitutes, one often hears the remark made that the woman led the man on. That may be true in some cases, but nobody can say that a little girl of seven, eight, nine or ten could lead a man on. I hope the Home Secretary will give his sympathetic attention to this matter. If he went into these cases he would feel as every right-minded man and woman in this House and outside it must feel. As the hon. Member for North Lambeth has said, this is not a woman's question; it is a man's question, because it is the abnormal and degenerate men who are responsible. I ask the Home Secretary to look into this matter and act. If he would act quickly and strongly he would have the whole of the awakened public conscience behind him. A conscience that is asleep does not matter in any country."

MRS. WINTRINGHAM:

"I wish to support all that was said by the hon. Member for North Lambeth (Mr. Briant) and the Noble Lady the Member for the Sutton Division (Viscountess Astor) in regard to the question of child assault. It is because we care greatly for these things that we dare to raise our voices on such an unpleasant subject. It is not a very easy thing to do. The House is sympathetic towards the subject we are discussing. I was particu-

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larly struck when the hon. Member for Bosworth (Major Paget) brought in a Bill a few days ago requesting that offences of this kind should be punished in a way that some of us perhaps did not agree with. At any rate, there was a feeling throughout the House that this class of offender should be very severely punished. The present administration for dealing with these cases has been suggested as inadequate. The procedure is that the offender is charged and he is convicted and sent to prison. Afterwards he is allowed to come out of prison. I want to go a step further. I do not want to say that the judges or those who give the sentences must make the sentence longer, but I want to deal with these men in rather a different manner. When they leave the prison they are a very serious harm to the public because generally there is a repetition of the offence.

"These men are degenerate in every sense of the word, but if it cannot be proved that they were mentally deficient at the age of three they cannot be classified under the Mental Deficiency Act that they are mentally deficient. I heard the other day of a man of 63 who for 40 years had lived a life of continually committing these offences, being repeatedly sent to prison, and released, and then committing the offence again. He had done that continuously for 40 years. That man ought to be looked upon as a mental degenerate and treated as such. There is so often lack of evidence in these cases, and the Court fails to convict through lack of evidence. I have known of a case in my own town two miles from where I live. A little girl was assaulted. After some pressure the mother was persuaded to let the case go to Court. The evidence was outstanding, and there was no question as to the man who had committed the offence. As the trial went on the little child was rather overcome. She was a child of only seven. She could not answer all the questions properly and finally broke down. The consequence was that the man was allowed to go scot free and is now committing similar offenses and has had no punishment whatever.

"We have to think of the harm that this is to the girls themselves. We feel as was suggested by the hon. Member for Lambeth the shock to them, the memories which they retain all through their lives, their appearance in Court, their difficulty in answering questions on these delicate matters, and again, their impressions when they have to be taken to various homes for treatment. I have been looking into the question of these homes and find that there is not anything like the accommodation which is necessary for these girls. At present there are four in England, and we could well do with 50, unfortunately, to take charge of all

the girls who are so afflicted, and who recover very slowly if they recover at all. Then there is always a stigma attaching to the child. There is the case of a child in my own town whose mother regrets that she ever sent the child to a home as the neighbors jeer at it now and that child is a marked child. There are many of these cases, in which there are no convictions owing to the difficulties in connection with the matter.

"Some people think that all criminals are insane or mentally deficient or victims of heredity or alcohol or environment, but in this matter we want to deal with those who are, to my mind, mentally deficient. I would ask the Home Secretary if he could consider the appointment of a Committee to look into this question of child assault, both with regard to the children and with regard to the offenders. If he would appoint a Committee consisting of medical men and representative women and lawyers who have knowledge of crime that could inquire into this question with a view to setting up machinery, such as that which is working with such extraordinary success, although it is only in its early stages, in Birmingham and in Essex, which bring about the examination from the psychological and scientific point of view of the men who commit these offenders. Such machinery with proper medical inspection would give us more scientific knowledge than we have at present and would lead to the treating of these men as moral degenerates rather than as ordinary persons.

"One does not want the appointment on the Benches of more women magistrates to deal with this question. If I mentioned the question of women police I should be called to order, but that will come on later. But one does feel that it is a very important point in reference to dealing with cases of assault on children, because they have capacity to question these children in a manner which makes them not afraid to state any evidence, and which does not give them a lasting impression of the horrible things through which they have gone. These two classes of women would follow up these cases with great advantage, and we should have more women police and more women magistrates.

CHILDREN OF MOTHERS UNDER AGE.

On the ground of cases reported in the literature and her own observations, Dr. Adelheid Wilsing (D. M. W., Aug. 24, 1923) reaches the conclusion that the viability of children born of young mothers is not impaired thru the act of delivery. Premature births are not more frequent than amongst mothers of normal age. The weight at birth of 20 per cent. of the children was less than 6½ pounds.

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The mammary gland of the young mother is perfectly developed, and consequently, feeding at the breast is possible. However, owing to economic and moral causes the results of the feeding of the infant are quite unfavorable.

Morbidity and mortality amongst these infants is not increased. The bodily and mental development is good, tho there were quite a few psychopaths amongst the young mothers that came under observation.

The early awakening of the sexual impulse in the mother may possibly be the cause of a hereditary predisposition in the child, though the children of very young primiparæ show as a rule no somatic or mental developmental weakness.

The conditions of multiple births of young mothers have not yet been established. At any rate, moral, social and economic reasons plead against early marriages.

MARRIAGES OF UNMARRIED MOTHERS.

Mildred D. Mudget (Jl. of Social Hygiene, April, 1923) presents the evidence of two studies, one concerning 133 girls who had been known to the Ramsay County Child Welfare Board (Minn.) between Jan. 1, 1918 and Nov. 1, 1921, and who had married during this period. The second study is of a similar but smaller group of unmarried mothers in Hennepin County (Minn.).

Out of 79 cases in which the girl married the father of her child there were 27 cases in which the situation was not satisfactory. There were twelve desertions by the fathers; six divorces; three separations; and two problems of non-support; in three cases there was considerable quarreling between the couples.

To the writer it seems as tho the marriages with men other than the father of the child were more successful than those with the father.

There is considerable evidence in the records that the relatives of both the man and the girl frequently took an important part in the marriage. In several of these cases the influence of the relatives was harmful.

The evidence in both these studies of unmarried mothers shows that the girls should not be encouraged to marry without a careful consideration of the factors involved; and this consideration presupposes a careful investigation of the history of both parents. Obviously, if either parent is mentally defective, the marriage should be prevented; if infected with venereal disease, delay or

prevention should intervene. In order to determine these points, the school records of both must be investigated, the physicians must be seen, the employers and relatives interviewed. If the girl is marrying a man other than the father of her child, the question of adoption of the child should be discussed with him before the marriage takes place.

UNJUST DISCRIMINATION IN PUNISHING IMMORALITY.

A writer in "*Die Neu Generation*" (May-June, 1923) reports that a female unmarried official in the postal service of the German Empire was discharged for "adultery" and "unbecoming conduct," because she had given birth to a child. Her appeal for re-instatement was turned down by the Postmaster General.

The facts are the following: The father, twelve years older than the mother of the illegitimate child, promised to marry her, but, when after conception had taken place, she reminded him of his promise, he confessed that he was a married man. The unfortunate woman had acted in good faith, and tho the Postmaster General had to admit that "unbecoming conduct" had not been proved, she was not re-instated.

The following case shows an even greater injustice. Within eleven months a married official of the same postal administration begot three children with three unmarried girls. He was allowed to keep his position and now receives the monthly legal allowance for his three illegitimate children, but the mothers?—oh, nobody cares for them, and the Herr General Postmaster has no word of disapproval for his conscienceless employee.

There is much talking done nowadays about the "equal rights of women," but the official circles are not in the least impressed by it, and the highly moral "Association of Female Postal Employees" insists on the dismissal of every unmarried mother, not realizing that it would indeed be moral to hold a protecting hand over a deceived girl instead of making an outcast of her.

Yes, stupidity is not entirely eliminated even in chastened Germany.

A SINGULAR FOREIGN BODY IN THE RECTUM.

Dr. K. Wisotzki (*Münch. Med. Wochenschrift*, July 6, 1923) reports the following case:

A porter, aged 48 years, was admitted March 23, 1923, after he had come on foot to the hospital. He stated that on March 8th, with the intention of curing a severe "diarrhea," he had followed the advice of a friend and introduced into his rectum a

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stick the rounded end of which had been anointed with "dog's fat." The stick had slipped from his hand and he had been unable to remove it. March 9th, vomiting and severe abdominal pains induced him to consult a physician who sent him to the hospital.

The patient was a small, sickly looking man who made a shy and somewhat demented impression.

Digital examination of the rectum disclosed the presence of a round, smooth foreign body. The abdomen was tympanitic and tender on pressure. Below the region of the gall-bladder one could note a marked swelling, which was very painful. Bimanual examination from the rectum revealed the fact that this swelling was caused by the presence of a foreign body, which could be easily moved to and fro.

It is worth while mentioning that the whole body of the patient was covered with tattooings of an obscene character.

Laparotomy was performed at once. There was no peritonitis; the Sigmoides was found to be pushed upwards as far as the swelling below the region of the gall-bladder was palpable, however, without being perforated nor showing any lesion save a sugillation in the wall, where the foreign body could be felt.

By a combined pressure from above and a pull from the rectum the foreign body was extracted per vias naturales.

It was a stick with a rounded end, 24 centimeters long and $3\frac{3}{4}$ cm. in diameter.

At first the patient had bronchitis and a high temperature, but he soon recovered and the seventeenth day he was able to get up.

The writer registers the significant fact that the patient had no "diarrhea" during his stay in the hospital. [Of course not. That is one of the excuses which the users of foreign bodies in the rectum for masturbatory purposes give when the body slips beyond their reach and they are obliged to have recourse to medical or surgical aid. They either wanted to stop a diarrhea or relieve constipation, or they had a terribly itching sensation and they could not help scratching, etc. And even the legitimate rectal dilator is not infrequently used not for its legitimate purposes but for the same old habit—masturbation.—R.]

BIOLOGY AND THE SEX PROBLEM.

Dr. Paul Kammerer ("*Die Neue Generation*", May-June, 1923) contends that there are no males and females in an absolutely pure form. Maleness and femaleness are mere abstractions. Here as elsewhere in nature, apparently opposite characters are connected by sliding gradations.

In reality there is only one sex—the hermaphrodite. Bi-sexuality is present in the “anlage” of every germ, but one of the two sex “anlagen” has a preponderant tendency, while the second one is kept back in the same measure as the first pushes forward. In spite of this, opposite sex elements, in varying degrees, remain in the bodily structure and the mental predisposition of every individual.

By Steinach's experiments it has been demonstrated that a female fetus can always be masculinized, and vice versa; the rudiments and possibilities for such transformations lie latent in every body.

Also artificial hybridization is possible by the insertion of one or the other generative gland, and according to the size and preservability of the latter, an infinite quantity of sexual variations may be produced. (“Sexual intermediate stages”, as M. Hirschfeld has designated them).

By transplantation of a small quantity of the opposite sex gland, only the most plastic portion, namely, the mentality, will be affected. We encounter persons who somatically belong to one sex, and according to their mentality, their desires and inclinations, belong to the opposite sex—wholly or partially: the body is masculine, but the mind is feminine; or, again, the body may be masculine, while the impulses and habits are bi-sexual. Also the reverse may occur. By the implantation of a larger quantity of the substance taken from the opposite sex, the somatic characteristics become transformed: the perennially young man with the downy beard, and the bearded though young woman are types encountered every day.

The possibilities of transformation are enhanced when the bi-sexual elements of the same person fluctuate with advancing years, and especially are the periods of the awakening or declining maturity “dangerous ages,” owing to the composition of the sex foundations.

There are no absolute differences between men and women: a female body may be endowed with an at least partially male brain, or a female brain may be masculinized by the insertion of a male gland.

In general, the generative glands and sex characteristics are firmly united through the bond of “internal secretion.”

However, this bond may become weakened or broken, either through special combinations of crossings or climatic influences.

In the past we knew only of men and women, and of the division of labor between the two sexes. Today, a more natural development of women has replaced this inter-individual division

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by an intra-individual division: the male element in the woman demands "masculine" work, while, on the other hand, the female element in the man drives him to "feminine" activities.

The woman is to be allowed to take up "masculine" occupations as far as her biological composition and her inclination makes this desirable and possible.

This demand on the side of woman has proved its justification by the overthrow of the fossilized formalism of an obsolete legislation, which a priori excluded her from certain activities.

Woman has gained freedom in the choice of any work to which ability and inclination entitle her.

This new attitude takes cognizance of the fact that masculine abilities and a central organ with masculine tendencies may reside in a female body.

But in all probability no higher development will ever obliterate the fact that maleness differs from femaleness—a division decreed by Nature. On the other hand, we should never forget that opposite elements may become united between different individuals as well as in the same individual, and that both sexes unalterably dwell in each human embryo, as Schiller has expressed in the prophetic words:

"Divine Love, thou joimest together the flowers of mankind—

Though eternally separated they are forever blended through and in Thee!"

THE PSYCHOLOGY OF CONSERVATISM.

Some conservatism is the expression of sincere and relatively unselfish intellectual conviction; most is the product of mere habit and uncritical fear, and not a little of it is thoroughly selfish in its motivation and insincere in its expression and reasoning. So far as conservatism is the product of conscious motivation, two primary motives prompt it: the one is selfish, material interest, economic or otherwise, in the established order of things; the other is a temperamental attachment to things-as-they-are. The attachment may or may not be productive of good or [what is] logically justifiable, but the individual always finds, if forced to, what seem to him good and sufficient reasons for it, and hence for the essential propriety and rightness of the things—the ideas, beliefs, institutions and relations—to which he is attached. Sometimes his reasoning may have objective scientific validity, but it is quite as likely to be the type of reasoning for self-defence and self-justification which the psycho-analysts call "rationalization," that is, casuistry.

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Because of this fundamental difference in motivation it is desirable, in an attempt to analyze the motives and characteristics of the conservative attitude, to distinguish what we may call, for want of better terms, *interested* conservatism and *disinterested* conservatism. Interested conservatism is motivated by narrow, selfish, egotistical, individual or class interests. The interested conservative invariably has an axe to grind, and it is distinctly his own. The motivation of interested conservatism is mainly, but not entirely economic. Disinterested conservatism, on the other hand, is an attitude due not to the calculating quality of the "narrower selfishness" or of conscious class interest, but rather to the pervasive influence of the instinct of fear, and of association, imitation, habit and adaptation. It is thus both temperamental [constitutional] and characteristic [environmental]. Both interested and disinterested conservatism may be observed in the same individual, and they gradate into each other in a manner which makes too sharp distinction between them erroneous.

In a very fundamental psychological and ethical sense, it may be urged that there is no such thing as disinterested conservatism, or, having regard for conscious motivation only, a disinterested attitude of any kind, since we assume those attitudes which correspond to our strongest habits, desires and interests. Any attitude may in this sense be regarded not only as the expression of the nature of the person but as a servant to the functioning of his personality. Whether we have quick and sensitive sympathy or are insensitive and unsympathetic, and whether we are broadly intelligent in finding our own happiness, in conjunction with that of others or are directly, narrowly and unintelligently selfish, it may be maintained (again so far as conscious motivation is concerned) that we always do things which, under the circumstances present to our appreciation, we deem will give us the most satisfaction. We are not concerned at this point, however, with this broader, deterministic and somewhat unconventional conception of self-interest. Whether all conduct be found in the last analysis to be self-centered or not, the practical fact remains that some people are temperamentally conservative and others so primarily from conscious motives of material self-interest in the narrow sense. And this distinction proves significant and essential to an attempt fairly and objectively to analyze the psychology of conservatism and the influence of conservatism upon social ideas and social achievement. (*From "Conservatism and Radicalism,—Some Definitions and Distinctions."* By Professor A. B. Wolfe in *The Scientific Monthly*, Sept. 1923.)

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FALSE MATING STANDARDS.

It is not woman's vanity that is breaking up homes, making marriage a failure, and divorce a by-word. It is the mad pace at which both men and women are pursuing pleasure, excitement, life. In this day of strenuous living a girl has to dress well to get a man. She has to dress well to hold him. Appearances go farther with men than with women. This is a false standard—this judging by appearances—but actual nevertheless.

The "vanity" is in man's eye as well as in woman's mind. Men may be big enough and wise enough to love a girl in spite of her clothes, but the fact that her dress is dowdy, out of date, or cheap, would not exactly help her to meet or know him.

The man who deliberately sets out to pick himself a mate who is not vain, who cares not for clothes, who eschews feminine trinkets, and can pass a millinery window without casting a backward glance, will travel far to find a companion and life mate. Should he find such a one we might be tempted to go a step further and say he deserves all he gets.

From the domestic economy point of view he comes into a good bargain, perhaps. Perhaps also, he may have a chance to learn to cook his own breakfast, to promote votes for women, and to study botany nights. For alas, his choice will be super-human and poor company for a man who is of the earth earthly. —(Ella M. E. Flick: "The Vanity of Woman." *America*. Sept. 29, 1923.).

TWINS, TRIPLETS AND QUADRUPLETS.

The correspondent of the *Jour. A. M. A.*, writes from Berlin that the reports of the statistical bureau show that there has been scarcely a year, during the first two decades of the present century, in which the birth of several quadruplets has not been recorded, which furnishes further evidence of the fertility of German woman.

In 1901, 1906, 1916 and 1919, only one group of quadruplets was born each year. However, in 1903, 1904, 1912 and 1914, there were two groups each year, and in 1905 and 1906, three groups. In 1902, there were three groups of quadruplets and one group of quintuplets.

In 1908, 1910, 1911, 1915 and 1917, there were four groups of quadruplets each year, and in 1913 there were six such groups. The German people were also richly blessed with triplets during these two decades. The maximum number of triplets were born in 1904 (291), and the minimum number in 1918 (111).

The year 1904 has also the largest number of twin births to its credit; namely, 26,751 out of 54,383 multiple births (individual children). While the frequency of multiple births during the past twenty years bears, in the main, the usual ratio to the total number of births, the year 1919 constitutes an exception, since, for this year, the proportion of multiple births to the total number of births was 2.68; whereas, in previous years, the proportion was, in almost every instance, under 2.60 per cent. In 1919, there were 17,333 groups among multiple births, and 34,855 children were thus born. There were, in that year, 17,144 pairs of twins born; in 5,513 instances, both twins were boys; in 6,561 cases, there was a boy and a girl, and in 5,070 instances, the twins were girls. There were 188 groups of triplets that year; in fifty-four instances all three triplets were boys, in forty-one cases one boy and two girls, and in forty-one instances all three triplets were girls. The quadruplets born in 1919 were all girls.

STERILIZATION OF THE UNFIT.

In the *Brit. M. J.*, of May 12, 1923, Havelock Ellis writes: Dr. R. A. Gibbons believes that legislation for (1) eugenical sterilization and (2) marriage by State health certificate is "to be hoped for."

There are good reasons, writes Havelock Ellis, why such legislation should not be hoped for. It is unlikely to come about, and it is undesirable that it should come about. The American mania for social legislation which so attracts Dr. Gibbons may better serve as a warning than as an example. It's strange, moreover, to find a member of the medical profession asking to have his present freedom controlled by the caprices of ignorant lay opinion.

Dr. Gibbons is ill informed concerning the evidence he brings forward. The Indiana law which he quotes became a dead letter in 1909, two years after it was passed, and was finally declared "unconstitutional" in 1921; so also that of New Jersey. The law of New York was repealed in 1920, and we are told "the history of this law is a record of incompetency and discredit; it has set back eugenic progress in the State's institutions more than ten years."

But Kansas has sought to make up, for here a law was passed which would enable Dr. Gibbons not only to operate by law, but also to be fined one thousand dollars if he operated otherwise than by law, and, further, to be sent to prison for thirty days should he fail, or neglect, or refuse, to operate. This is the logical result of sterilization by law.

...In his thirst for sterilization laws Dr. Gibbons fails to make clear that they are quite unnecessary. There is nothing today

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to impede the spread of Eugenic Sterilization among us—with, of course, the consent of all responsible persons concerned—as introduced fifteen years ago in Switzerland.

One would like to know why Dr. Gibbons, who has so much to say about the United States, fails to refer to the highly relevant fact that in the State of New York it has for more than ten years been the practice at the Buffalo State Hospital for Women to sterilize for eugenic reasons, with the written consent of the relations, but without reference to any law. This is the line of sound progress.

With regard to marriage by health certificate, and compulsory celibacy, while there is good reason for opposing *procreation* by unsuitable persons, there is no social reason for opposing *marriage*, but rather the reverse. In the early world marriage and procreation may have been the same thing; they have long ceased to be the same thing in the world in which Dr. Gibbons lives. In muddling them up he commits an unfortunate confusion, for not only is his anti-marriage propaganda bound to fail, but in the mere act of preaching it he is bringing ridicule and discredit upon the eugenic control of procreation.

Queries and Answers

J. B.—Yes, about this there is no question. There are a great many more homosexuals among women than there are among men.—R.

Mrs. V.—We know of no case of injury that has ever been caused by the use of modern chemical prevenience. And we are convinced, knowing the composition as we do, that no injury can result. The “uterine key” may cause trouble; it is a foreign body and its presence during a long period may cause ulceration of the cervix which may perhaps result in more serious complications. As to pessary “invented by Dr. Stopes,” we regret to say, first, that Dr. Stopes has not invented any pessary; that pessary has been used for half a century before Mrs. Stopes heard of it; and, second, the failures following its use are too many to be too enthusiastic about it. If well fitted and well retained, it is efficient enough. But unfortunately it too frequently gets out of position.—R.

THE STEINACH OPERATION.

A. N.—Sorry, but the status of the so-called Steinach operation is not yet definitely established, and definite statements as to

its value or valuelessness can not yet be made. Definite statements are being made, but they are invariably ex-parte statements. Nor am I willing to make any definite statements regarding the effects of gland transplantation. It is all in the experimental stage, and we must await further and more objective, more unbiased reports.

The latest report on the results of the Steinach operation is by Dr. L. Cardenal, Professor of Surgery in Madrid.

He had tried this method recently in fifty-eight persons (see *Jour. Am. Med. Ass'n.*, October 6, 1923; correspondence from Madrid).

These he divides into three groups: (1) twenty-seven men under 40 years of age, who were prematurely senescent; (2) twenty-two men aged from 50 to 60; (3) nine men aged over 60 years. In thirteen cases, the vasa deferentia were ligated; in sixteen cases, the small efferent ducts were ligated on one side only; in twenty-two cases, the efferent ducts were tied on both sides. Seven patients have been lost to observation, and no results were secured in the cases in which the vas deferens was ligated. There thus remain thirty-eight cases for consideration. In fourteen, the treatment failed completely; in the other twenty-four the effects were marked, as shown by increase in weight, changes in the skin and growth of hair. According to reports from the physician, school-master and priest of the towns in which these patients live, the improvement in mentality has been remarkable in practically all the patients. One patient, over 70 years old, has started to learn to read. In many, the development of libido and potentia coeundi has been such as to be considered by the patients a sign of disease. The best results were obtained when the vasa efferentia were ligated on both sides. The prematurely senile patients without organic disease showed the most improvement. Dr. Cardenal guarded against the effects of autosuggestion, by not informing his patients in advance of the nature of the operation he was planning. Most of them were under the impression that they were being operated on for hernia.—R.

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